## Missouri Long Term Care Facilities Directory

ABBEY SENIOR HEALTH 206 NORTH MAIN ST		<b>Telephone</b> (636) 240-5754	Alzheimer's Unit	No
O'FALLON	MO 63366-2299	Level of Care: SNF	Bed Capacity	55
Mailing Address 206 NORTH MAIN S	T	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-2299	Region 5 Medicare/Medicaid	Facility Number	27367
			•	
ABERDEEN HEIGHTS				
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	No
KIRKWOOD	MO 63122-5536	Level of Care: ALF**	Bed Capacity	36
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
		Region	Tuesday Tumber	27370
ABERDEEN HEIGHTS				
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	Yes
KIRKWOOD	MO 63122-5536	Level of Care: ICF	Bed Capacity	16
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ABERDEEN HEIGHTS		T-l (214) 000 c000	41-1	NT-
505 COUCH AVE	MO (2122 552)	<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	No
KIRKWOOD  Mailing Address 505 COLICIL AVE	MO 63122-5536	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	38 No.
Mailing Address 505 COUCH AVE KIRKWOOD	MO 63122-5536			No
KIKKWOOD	MO 03122-3330	Region 7 Medicare/Medicaid	Facility Number	27570
ACKERT PARK SKILLED NURSING	G & REHABILITATION CENTER			
894 LELAND AVE		<b>Telephone</b> (314) 726-4767	Alzheimer's Unit	No
		. ,		110
UNIVERSITY CITY	MO 63130-3239	Level of Care: SNF	<b>Bed Capacity</b>	130
UNIVERSITY CITY  Mailing Address 894 LELAND AVE	MO 63130-3239	• '	Bed Capacity DMH Licensed	
	MO 63130-3239 MO 63130-3239	Level of Care: SNF	= -	130
Mailing Address 894 LELAND AVE		Level of Care: SNF County SAINT LOUIS COUNTY	DMH Licensed	130 No
Mailing Address 894 LELAND AVE UNIVERSITY CITY		Level of Care: SNF County SAINT LOUIS COUNTY	DMH Licensed	130 No
Mailing Address 894 LELAND AVE UNIVERSITY CITY ADAIR VILLAGE		Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	DMH Licensed Facility Number	130 No 02100
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON	MO 63130-3239	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196	DMH Licensed Facility Number  Alzheimer's Unit	130 No 02100 Yes
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR	MO 63130-3239	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 02100 Yes 120
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON	MO 63130-3239  MO 64735-1127  MO 64735-1127	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 02100 Yes 120 No
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUI	MO 63130-3239  MO 64735-1127  MO 64735-1127	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 02100 Yes 120 No 08521
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUI 2160 SE BLUE PARKWAY	MO 63130-3239  MO 64735-1127  MO 64735-1127	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 02100 Yes 120 No 08521
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUE 2160 SE BLUE PARKWAY LEE'S SUMMIT	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 02100 Yes 120 No 08521
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUR 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 02100 Yes 120 No 08521 Yes 88 No
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUE 2160 SE BLUE PARKWAY LEE'S SUMMIT	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	130 No 02100 Yes 120 No 08521
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUR 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007  XWAY  MO 64063-1007	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	130 No 02100 Yes 120 No 08521 Yes 88 No 28136
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUR 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL COR 9601 NORTH TULLIS DR	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007  KWAY  MO 64063-1007	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 02100 Yes 120 No 08521 Yes 88 No 28136
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUR 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL COR 9601 NORTH TULLIS DR KANSAS CITY	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007  KWAY  MO 64063-1007  REEK  MO 64157-7890	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3  Telephone (816) 407-9667 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 02100 Yes 120 No 08521 Yes 88 No 28136
Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADAIR VILLAGE 1801 N GAINES DR CLINTON Mailing Address 1801 N GAINES DR CLINTON  ADDINGTON PLACE OF LEE'S SUR 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL COR 9601 NORTH TULLIS DR	MO 63130-3239  MO 64735-1127  MO 64735-1127  MMIT  MO 64063-1007  KWAY  MO 64063-1007  REEK  MO 64157-7890	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 885-8196 Level of Care: SNF County HENRY Region 1 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	130 No 02100 Yes 120 No 08521 Yes 88 No 28136

<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

ADVANCE ASSISTED LIVING				
252 PAYTON PLACE		<b>Telephone</b> (573) 722-5200	Alzheimer's Unit	No
ADVANCE	MO 63730-7251	Level of Care: ALF	Bed Capacity	44
Mailing Address PO BOX 790		County STODDARD	DMH Licensed	No
ADVANCE	MO 63730-0790	Region 2	Facility Number	28426
AZING HEALTH CADE INC				
AKINS HEALTH CARE, INC 4432 WEST BELLE PL		The Late (214) (52, 9009)	Alzheimer's Unit	NI-
	MO (2100 2617	<b>Telephone</b> (314) 652-8908		No
SAINT LOUIS	MO 63108-2617	Level of Care: RCF	Bed Capacity	20
Mailing Address 4432 WEST BELLE F		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2617	Region 7	Facility Number	00078
ALLEGRO		m 1 1	.,,,	•-
1055 BELLEVUE AVENUE		<b>Telephone</b> (314) 332-8372	Alzheimer's Unit	Yes
RICHMOND HEIGHTS	MO 63117-1827	Level of Care: ALF**	Bed Capacity	88
Mailing Address 1055 BELLEVUE AV		County SAINT LOUIS COUNTY	DMH Licensed	No
RICHMOND HEIGHTS	MO 63117-1827	Region 7	Facility Number	31437
ALLWAYS KARE RESIDENTIAL FA	ACILITY, INC			
5076 WATERMAN		<b>Telephone</b> (314) 367-9516	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-1102	Level of Care: RCF	Bed Capacity	20
Mailing Address 5076 WATERMAN		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-1102	Region 7	Facility Number	05212
AMBROSE PARK				
517 NORTH OAK		<b>Telephone</b> (660) 668-3140	Alzheimer's Unit	No
COLE CAMP	MO 65325-1264	Level of Care: RCF	Bed Capacity	30
Mailing Address PO BOX 252		County BENTON	DMH Licensed	No
COLE CAMP	MO 65325-0252	Region 6	Facility Number	26313
ANEW HEALTHCARE AND REHAM	3-WELLSVILLE	T. I		
250 E LOCUST	110 - 5000 1 1 100	<b>Telephone</b> (573) 684-2002	Alzheimer's Unit	No
WELLSVILLE	MO 63384-1422	Level of Care: SNF	Bed Capacity	112
Mailing Address 250 E LOCUST		County MONTGOMERY	DMH Licensed	No
WELLSVILLE	MO 63384-1422	Region 6 Medicare/Medicaid	Facility Number	02740
ANEW HEAT THICARE OREGO				
ANEW HEALTHCARE ODESSA		m 1 1 (016) 200 7720	411.	3.7
609 GOLF ST	NO 64076 1469	<b>Telephone</b> (816) 230-7530	Alzheimer's Unit	No
ODESSA	MO 64076-1462	Level of Care: SNF	Bed Capacity	60
Mailing Address 609 GOLF ST	110 (107)	County LAFAYETTE	DMH Licensed	No
ODESSA	MO 64076-1462	Region 3 Medicare/Medicaid	Facility Number	05749
ANEW HEALTHCARE SAVANNAH				
13277 STATE ROUTE D		<b>Telephone</b> (816) 324-5991	Alzheimer's Unit	Yes
SAVANNAH	MO 64485-9431	Level of Care: SNF	Bed Capacity	88
Mailing Address 13277 STATE ROUT		County ANDREW	DMH Licensed	No
IVIAIMING AUGITESS 132// STATE ROUT	עם	County ANDREW	Divili Liceliseu	NO

Medicare/Medicaid

**Facility Number** 

07147

MO 64485-9431

SAVANNAH

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ANNA DODSON HOME				
4616 HIGHWAY D		<b>Telephone</b> (573) 756-5530	Alzheimer's Unit	No
FARMINGTON	MO 63640-7241	Level of Care: RCF	Bed Capacity	17
Mailing Address 4616 HWY D		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number	02160
ANNA DODSON HOME				
4616 HIGHWAY D		<b>Telephone</b> (573) 756-5530	Alzheimer's Unit	No
FARMINGTON	MO 63640-7241	Level of Care: RCF*	<b>Bed Capacity</b>	20
Mailing Address 4616 HWY D		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number	02160
ANNA'S HOUSE ASSISTED LIVING	C FACILITY			
25466 NORTH HWY 5	FACILITI	<b>Telephone</b> (417) 839-7637	Alzheimer's Unit	No
LEBANON	MO 65536-	Level of Care: ALF	Bed Capacity	80
Mailing Address PO BOX 969	WO 03330	County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-0969	Region 1	Facility Number	08791
LEBRITOR	NIC 03330 0707	Kegion 1	racincy runiber	08791
ANNIFIG HOUGE THE				
ANNIE'S HOUSE INC		(572) 220 1200		
25228 BUZZARD DRIVE	NO 62564 0400	<b>Telephone</b> (573) 238-1300	Alzheimer's Unit	No
MARBLE HILL	MO 63764-9408	Level of Care: RCF	Bed Capacity	40
Mailing Address 25228 BUZZARD DI		County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9408	Region 2	Facility Number	30984
ANTHOLOGY OF BURLINGTON C	CREEK			
6311 NORTH COSBY AVENUE		<b>Telephone</b> (816) 527-8504	Alzheimer's Unit	Yes
6311 NORTH COSBY AVENUE KANSAS CITY	MO 64151-2344	Level of Care: ALF**	Bed Capacity	110
6311 NORTH COSBY AVENUE KANSAS CITY <b>Mailing Address</b> 6311 N COSBY AVE	MO 64151-2344 ENUE	Level of Care: ALF** County PLATTE	Bed Capacity DMH Licensed	110 No
6311 NORTH COSBY AVENUE KANSAS CITY	MO 64151-2344	Level of Care: ALF**	Bed Capacity	110
6311 NORTH COSBY AVENUE KANSAS CITY <b>Mailing Address</b> 6311 N COSBY AVE KANSAS CITY	MO 64151-2344 ENUE MO 64151-2344	Level of Care: ALF** County PLATTE	Bed Capacity DMH Licensed	110 No
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY ANTHOLOGY OF CLAYTON VIEW	MO 64151-2344 ENUE MO 64151-2344	Level of Care: ALF** County PLATTE Region 4	Bed Capacity DMH Licensed Facility Number	110 No 30198
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD	MO 64151-2344 ENUE MO 64151-2344	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	110 No 30198 Yes
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 30198 Yes 90
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 30198 Yes 90 No
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 30198 Yes 90
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 30198 Yes 90 No
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 30198 Yes 90 No
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 30198 Yes 90 No
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS ANTHOLOGY OF THE PLAZA	MO 64151-2344 ENUE MO 64151-2344 W MO 63144-1205	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 30198 Yes 90 No 30363
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD	MO 64151-2344 ENUE MO 64151-2344  W MO 63144-1205 MO 63144-1205  MO 64112-1712	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 30198 Yes 90 No 30363
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY	MO 64151-2344 ENUE MO 64151-2344  W MO 63144-1205 MO 63144-1205  MO 64112-1712	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 30198 Yes 90 No 30363
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY Mailing Address 2 EMANUEL CLEAVER	MO 64151-2344 ENUE MO 64151-2344  W MO 63144-1205 MO 63144-1205  MO 64112-1712 WER II BLVD	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF** County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 30198 Yes 90 No 30363
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY Mailing Address 2 EMANUEL CLEAVE KANSAS CITY ANTHOLOGY OF TOWN & COUNT	MO 64151-2344 ENUE MO 64151-2344  W MO 63144-1205 MO 63144-1205  MO 64112-1712 VER II BLVD MO 64112-1712	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF** County JACKSON Region 3	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 30198 Yes 90 No 30363 Yes 96 No 31791
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY Mailing Address 2 EMANUEL CLEAVE KANSAS CITY  ANTHOLOGY OF TOWN & COUNT 1020 WOODS MILL ROAD	MO 64151-2344 ENUE MO 64151-2344  W MO 63144-1205 MO 63144-1205  MO 64112-1712 WER II BLVD MO 64112-1712	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF** County JACKSON Region 3  Telephone (636) 527-4444	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 30198 Yes 90 No 30363 Yes 96 No 31791
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY Mailing Address 2 EMANUEL CLEAVE KANSAS CITY  ANTHOLOGY OF TOWN & COUNT 1020 WOODS MILL ROAD TOWN AND COUNTRY	MO 64151-2344  ENUE MO 64151-2344  W MO 63144-1205  MO 63144-1205  MO 64112-1712  VER II BLVD MO 64112-1712  VERY MO 63017-0603	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF** County JACKSON Region 3  Telephone (636) 527-4444 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 30198 Yes 90 No 30363 Yes 96 No 31791
6311 NORTH COSBY AVENUE KANSAS CITY Mailing Address 6311 N COSBY AVE KANSAS CITY  ANTHOLOGY OF CLAYTON VIEW 8825 EAGER ROAD SAINT LOUIS Mailing Address 8825 EAGER ROAD SAINT LOUIS  ANTHOLOGY OF THE PLAZA 2 EMANUEL CLEAVER II BLVD KANSAS CITY Mailing Address 2 EMANUEL CLEAVE KANSAS CITY  ANTHOLOGY OF TOWN & COUNT 1020 WOODS MILL ROAD	MO 64151-2344  ENUE MO 64151-2344  W MO 63144-1205  MO 63144-1205  MO 64112-1712  VER II BLVD MO 64112-1712  VERY MO 63017-0603	Level of Care: ALF** County PLATTE Region 4  Telephone (314) 961-1700 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (816) 505-3030 Level of Care: ALF** County JACKSON Region 3  Telephone (636) 527-4444	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 30198 Yes 90 No 30363 Yes 96 No 31791

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ANTHOLOGY OF WILDWOOD 251 PLAZA DRIVE WILDWOOD Mailing Address 251 PLAZA DRIVE WILDWOOD	MO 63040-1203 MO 63040-1203	Telephone (636) 273-3900 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7		94 No
APPLE RIDGE CARE CENTER 100 WEST THOMAS AVE WAVERLY Mailing Address PO BOX 188 WAVERLY	MO 64096-9143 MO 64096-0188	Telephone (660) 493-2232 Level of Care: SNF County LAFAYETTE Region 3 Medicare/Medicaid		60 No
APPLEGATE RETIREMENT HOMI 1204 TELEGRAPH RD SAINT LOUIS Mailing Address 1204 TELEGRAPH R SAINT LOUIS	MO 63125-2528	Telephone (314) 631-2003 Level of Care: RCF* County SAINT LOUIS COUNTY Region 7	Bed Capacity 3	No 38 es 09
APPLETON CITY MANOR 600 NORTH OHIO ST APPLETON CITY Mailing Address PO BOX 98 APPLETON CITY	MO 64724-1609 MO 64724-0098	Telephone (660) 476-2128 Level of Care: SNF County SAINT CLAIR Region 1 Medicare/Medicaid	Bed Capacity 6	No 60 No 37
ARBOR HILLS NURSING AND REE 800 CHAMBERS RD FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON	MO 63135-2133	Telephone (314) 524-1111 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity 15	No 50 No 35
ARBOR HILLS NURSING AND REE 800 CHAMBERS RD FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON	MO 63135-2133	Telephone (314) 524-1111 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity 2	No 28 No 35
ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN	MEMORY CARE ASSISTED LIVING I MO 63080-1270 MO 63080-1270	Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6		50 No
ARBORS AT GLENDALE GARDEN 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON	S - MEMORY CARE BY AMERICARE  MO 64735-2728  MO 64735-2728	Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity 4	es 42 No 54

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A BROOM AT WARMONW GARRENG	A MEMORY OF BE A CONCERN A MANAGE	O DEC A MEDICA D	NE WYE		
	S-MEMORY CARE ASSISTED LIVING			A lada atau and a TT-24	V
539 EAST YOUNG AVENUE	MO (4002 1000	Telephone	(660) 429-0034	Alzheimer's Unit	Yes
WARRENSBURG	MO 64093-1228	Level of Care:	ALF**	Bed Capacity	24 N-
Mailing Address 539 EAST YOUNG A			HNSON	DMH Licensed	No
WARRENSBURG	MO 64093-1228	Region 3		Facility Number	31389
ARBORS AT HIGHLAND CREST - A	ALZHEIMERS ASSISTED LIVING BY	AMERICARE, T	THE		
620 GILASPY ROAD		Telephone	(660) 627-8004	Alzheimer's Unit	Yes
KIRKSVILLE	MO 63501-4678	Level of Care:	ALF**	<b>Bed Capacity</b>	28
Mailing Address 620 GILASPY RD		County AD	AIR	DMH Licensed	No
KIRKSVILLE	MO 63501-4678	Region 5		Facility Number	23608
ARBORS AT LAKEVIEW BEND - A	SSISTED LIVING BY AMERICARE, T	THE			
1700 ASBURY CIRCLE WEST	0020120 21 (11 (0 2 1 11 (12 11 2 11 12 11 2 11	Telephone	(573) 581-8777	Alzheimer's Unit	Yes
MEXICO	MO 65265-1400	Level of Care:	ALF**	Bed Capacity	39
Mailing Address 1722 HUNTINGFIEL			DRAIN	DMH Licensed	No
MEXICO	MO 65265-3808	Region 5		Facility Number	13544
	110 00200 0000	Region 5		Tuesday Tuesday	13344
ARBORS AT MOUNT CARMEL, TH	Œ				
723 FIRST CAPITOL DR		Telephone	(636) 946-4140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2729	Level of Care:	ALF**	Bed Capacity	30
Mailing Address 723 FIRST CAPITOL			INT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2729	Region 5		Facility Number	29396
ARBORS AT PARKSIDE - MEMORY	Y CARE ASSISTED LIVING BY AMEI	RICARE			
1700 EAST 10TH ST		Telephone	(573) 364-2602	Alzheimer's Unit	Yes
ROLLA	MO 65401-4600	Level of Care:	ALF**	<b>Bed Capacity</b>	22
Mailing Address 1700 EAST 10TH ST		County PH	ELPS	DMH Licensed	No
ROLLA	MO 65401-4600	Region 6		Facility Number	13589
ARBORS AT VICTORIAN PLACE O	OF CUBA, MEMORY CARE ASSISTED	D LIVING BY AM	IERICARE, THE		
903 HWY DD	, , , , , , , , , , , , , , , , , , , ,	Telephone	(573) 885-0551	Alzheimer's Unit	Yes
CUBA	MO 65453-8089	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 903 HWY DD		County CR	AWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6		Facility Number	27071
ARBORS AT VICTORIAN DI ACE O	OF WASHINGTON, MEMORY CARE A	ASSISTED I IVIN	G RY AMERICADE	тне	
2701 RABBIT TRAIL DR	I MADILITOTON, MEMORI CARE F	Telephone	(636) 390-9500	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-6711	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 2701 RABBIT TRAIL			ANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6711	Region 6	AINKLIN	Facility Number	28065
WASHINGTON	WO 03090-0711	Kegion 0		racinty Number	28003
ARBORS AT WESTBROOK TERRA	CE-ALZHEIMER'S ASSISTED LIVIN		RE		
3409 NORTH 10 MILE DR		Telephone	(573) 556-5648	Alzheimer's Unit	Yes
JEFFERSON CITY	MO 65109-0530	Level of Care:	ALF**	Bed Capacity	26
Mailing Address 3409 NORTH 10 MIL		County CO	LE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0530	Region 6		Facility Number	27914

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APROPS AT WESTRINGE PLACE	- MEMORY CARE BY AMERICARE,	THE	
539 NORTH WEST ST	- MEMORI CARE DI AMERICARE,	<b>Telephone</b> (573) 471-6484	Alzheimer's Unit Yes
SIKESTON	MO 63801-5443	Level of Care: ALF**	Bed Capacity 28
Mailing Address 539 NORTH WEST S		County SCOTT	DMH Licensed No
SIKESTON	MO 63801-5443	Region 2	Facility Number 12693
SIKESTON	1410 03001-3443	Region 2	racinty Number 12093
ARIZONA CARE CENTER			
101 ARIZONA ST		<b>Telephone</b> (573) 237-4830	Alzheimer's Unit No
NEW HAVEN	MO 63068-1210	Level of Care: ALF	<b>Bed Capacity</b> 15
Mailing Address 101 ARIZONA ST		County FRANKLIN	<b>DMH Licensed</b> Yes
NEW HAVEN	MO 63068-1210	Region 6	Facility Number 19080
ARMOUR OAKS SENIOR LIVING	COMMUNITY		
8100 WORNALL RD		<b>Telephone</b> (816) 363-5141	Alzheimer's Unit No
KANSAS CITY	MO 64114-5806	Level of Care: SNF	Bed Capacity 38
Mailing Address 8100 WORNALL RE		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64114-5806	Region 3 Medicare/Medicaid	Facility Number 00199
		Region 5 Medicare/Medicard	Tuesday 1 (united to 1001)
ARMOUR OAKS SENIOR LIVING	COMMUNITY		
8100 WORNALL RD		<b>Telephone</b> (816) 363-5141	Alzheimer's Unit No
KANSAS CITY	MO 64114-5806	Level of Care: ALF	<b>Bed Capacity</b> 47
Mailing Address 8100 WORNALL RD	)	<b>County</b> JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64114-5806	Region 3	Facility Number 00199
ARROWHEAD SENIOR LIVING CO	OMMUNITY		
6100 ARROWHEAD DRIVE		<b>Telephone</b> (573) 302-7111	Alzheimer's Unit Yes
OSAGE BEACH	MO 65065-2754	Level of Care: ALF**	Bed Capacity 90
Mailing Address 6100 ARROWHEAD		County CAMDEN	DMH Licensed No
OSAGE BEACH	MO 65065-2754	Region 6	Facility Number 31536
		Region	31330
ARROWHEAD SENIOR LIVING CO	OMMUNITY		
6100 ARROWHEAD DRIVE		<b>Telephone</b> (573) 302-7111	Alzheimer's Unit No
OSAGE BEACH	MO 65065-2754	Level of Care: SNF	Bed Capacity 80
Mailing Address 6100 ARROWHEAD	DRIVE	County CAMDEN	<b>DMH Licensed</b> No
OSAGE BEACH	MO 65065-2754	Region 6 Medicare/Medicaid	Facility Number 31536
ASCENSION LIVING SHERBROOF	KE VILLAGE		
4005 RIPA AVE		<b>Telephone</b> (314) 544-1111	Alzheimer's Unit Yes
SAINT LOUIS	MO 63125-2378	Level of Care: SNF	Bed Capacity 149
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63125-2378	Region 7 Medicare/Medicaid	Facility Number 15436
ASCENSION LIVING SHERBROOF	CE VII I ACE		
4005 RIPA AVE	ME VILLAGE	<b>Telephone</b> (314) 544-1111	Alzheimer's Unit YES
SAINT LOUIS	MO 63125-2378	Level of Care: ALF**	Bed Capacity 88
Mailing Address 4005 RIPA AVE	110 03123 2370	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63125-2378	Region 7	Facility Number 15436
S. III 11 12 0 113	1.10 00120 2010	region /	2 delity 1 diliber 15450

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Telephone	ACH CDOVE HEAT THOADE EACH	TTT		
ASH GROVE	ASH GROVE HEALTHCARE FACIL	LIIY	Telephone (417) 751-2575	Alzhaimer's Unit Ves
Mailing Address PO BOX 247		MO 65604-1004	• '	
ASHBROOK - ASSISTED LIVING BY AMERICARE  500 ASHBROOK DR  Bed Capacity  72  County  ASHBROOK DR  ASHBROOK DR  ASHBROOK DR  ASHBROOK DR  ASHBROOK DR  ASHBROOK DR  Bed Capacity  18138  ASHBURY HEIGHTS OF CHILLICOTHE  Bod 64601-2438  ASHBURY HEIGHTS OF CHILLICOTHE  MO 64601-2438  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  ASHBURY HEIGHTS OF FAYETTE  ASHBURY HEIGHTS OF FAYETTE  ASHBURY HEIGHTS OF FAYETTE  ASHBURY HEIGHTS OF FAYETTE  MO 65248-9813  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF JEFFERSON CITY  AND 65101-1824  ASHBURY HEIGHTS OF Bed Capacity  12  ASHBURY HEIGHTS OF LAURE  299 HIGHWAY RA  ACHORITOR OF COLD  ACHO		110 03001 1001		- ·
ASHBROOK - ASSISTED LIVING BY AMERICARE  500 ASHBROOK DR  FARMINGTON MO 63640-9235  Cuculy SANT FRANCOIS  Bed Capacity 72  Mailing Address 500 ASHBROOK DR  Caunly SANT FRANCOIS  Bull Licensed No FARMINGTON MO 63640-9235  Region 2  Telephone (660) 707-1270  Alzheimer's Unit No ASHBURY HEIGHTS OF CHILLICOTHE  630 ST LOUIS ST  CHILLICOTHE MO 64601-2438  Level of Care: RCF Bed Capacity 12  Mailing Address 630 ST LOUIS ST  CHILLICOTHE MO 64601-2438  Level of Care: RCF Bed Capacity 12  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  AND 65248-9813  Level of Care: RCF Bed Capacity 12  Mailing Address 630 ROCE ST  AND 65248-9813  Level of Care: RCF Bed Capacity 12  Mailing Address 704 WEST CHESTNUT  FULTON MO 65251-1254  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  ASHBURY HEIGHTS OF FULTON  MO 65251-1254  ASHBURY HEIGHTS OF JEFFERSON CITY  834 WEATHERED ROCK COURT  MO 65101-1824  ASHBURY HEIGHTS OF JEFFERSON CITY  834 WEATHERED ROCK COURT  MO 65101-1824  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF LAURIE  299 HIGHWAY RA  Level of Care: RCF Bed Capacity  12  ASHBURY HEIGHTS OF MONTGOMERY CITY  635 WEST 2ND ST  MONTGOMERY CITY  MO 63361-1762  ASHBURY HORDONERY CITY  635 WEST 2ND ST  MONTGOMERY CITY  MO MONTGOMERY DM MILLicensed  No  MONTGOMERY CITY  Mo MONTGOMERY DM MILLicensed  No  MONTGOMERY CITY  Mo MONTGOMERY CITY  Balchimer's Unit No  Level of Care: RCF Bed Capacity  12  Bed Capacity  13  ASHBURY HEIGHTS OF MONTGOMERY  Level of Care: RCF Bed Capacity  13  A	•	MO 65604-0247	•	
Mo   Gadden     Care			Treation of Frenchia	
Sol Salter	ASHBROOK - ASSISTED LIVING B	Y AMERICARE		
FARMINGTON			<b>Telephone</b> (573) 756-5544	Alzheimer's Unit No
Mailing Address 500 ASHBROOK DR   County   SAINT FRANCOIS   DMIL Licensed   No FARMINGTON   No 63640-9235   Region   2	FARMINGTON	MO 63640-9235	-	Bed Capacity 72
ASHBURY HEIGHTS OF CHILLICOTHE  603 ST LOUIS ST  CHILLICOTHE  M0 64601-2438  Level of Care: RCF  Red Capacity 12  Mailing Address 603 ST LOUIS ST  COUNTY  CHILLICOTHE  M0 64601-2438  Region 4 Fecility Number 23909  ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST  FAYETTE  M0 65248-9813  Level of Care: RCF  Bed Capacity 12  Mailing Address 200 GROCE ST  COUNTY  Mailing Address 200 GROCE ST  COUNTY  MOWARD  MOW	Mailing Address 500 ASHBROOK DR		County SAINT FRANCOIS	
STLOUIS ST	FARMINGTON	MO 63640-9235	Region 2	Facility Number 18138
CHILLICOTHE	ASHBURY HEIGHTS OF CHILLICO	ОТНЕ		
Mailing Address 603 ST LOUIS ST   County LIVENGSTON   DMII Licensed   Yes	603 ST LOUIS ST		<b>Telephone</b> (660) 707-1270	Alzheimer's Unit No
CHILLICOTHE   MO 64601-2438   Region 4   Facility Number   23909	CHILLICOTHE	MO 64601-2438	Level of Care: RCF	<b>Bed Capacity</b> 12
ASHBURY HEIGHTS OF FAYETTE  200 GROCE ST	Mailing Address 603 ST LOUIS ST		•	
Telephone   G60   248-3603   Alzheimer's Unit   No	CHILLICOTHE	MO 64601-2438	Region 4	Facility Number 23909
Telephone   G60   248-3603   Alzheimer's Unit   No	ASHBURY HEIGHTS OF FAYETTE			
FAYETTE			<b>Telephone</b> (660) 248-3603	Alzheimer's Unit No
ASHBURY HEIGHTS OF FULTON	FAYETTE	MO 65248-9813	Level of Care: RCF	Bed Capacity 12
ASHBURY HEIGHTS OF FULTON  704 WEST CHESTNUT  Mo 65251-1254  Mailing Address 704 WEST CHESTNUT  FULTON  MO 65251-1254  ASHBURY HEIGHTS OF JEFFERSON CITY  834 WEATHERED ROCK COURT  JEFFERSON CITY  Mol 65101-1824  Mol 65101-	Mailing Address 200 GROCE ST		County HOWARD	DMH Licensed No
Telephone   (573) 642-2015   Alzheimer's Unit   No	FAYETTE	MO 65248-9813	Region 5	Facility Number 23894
ASHBURY HEIGHTS OF JEFFERSON CITY  834 WEATHERED ROCK COURT    Fefenson City   MO   65101-1824   Level of Care:   RCF   Bed Capacity   12	704 WEST CHESTNUT FULTON		Level of Care: RCF	<b>Bed Capacity</b> 12
S34 WEATHERED ROCK COURT	FULTON	MO 65251-1254	Region 6	Facility Number 23923
299 HIGHWAY RA         Telephone (573) 374-0076         Alzheimer's Unit         No           LAURIE         MO 65038-6024         Level of Care: RCF         Region (ST)         Bed Capacity         12           ASHBURY HEIGHTS OF MONTGOMERY CITY           625 WEST 2ND ST         Telephone (ST) 564-3386         Alzheimer's Unit         No           MONTGOMERY CITY         MO 63361-1762         Level of Care: RCF         RCF         Bed Capacity         12           Mailing Address 625 WEST 2ND ST         County         MONTGOMERY         DMH Licensed         No	834 WEATHERED ROCK COURT JEFFERSON CITY <b>Mailing Address</b> 834 WEATHERED R	MO 65101-1824 OCK COURT	Level of Care: RCF County COLE	<b>Bed Capacity</b> 12 <b>DMH Licensed</b> No
LAURIE         MO 65038-6024         Level of Care:         RCF         Bed Capacity         12           Mailing Address 299 HIGHWAY RA         County         MORGAN         DMH Licensed         No           LAURIE         MO 65038-6024         Region 6         Facility Number         23915           ASHBURY HEIGHTS OF MONTGOMERY CITY           625 WEST 2ND ST         Telephone         (573) 564-3386         Alzheimer's Unit         No           MONTGOMERY CITY         MO 63361-1762         Level of Care:         RCF         Bed Capacity         12           Mailing Address 625 WEST 2ND ST         County         MONTGOMERY         DMH Licensed         No	ASHBURY HEIGHTS OF LAURIE			
Mailing Address 299 HIGHWAY RA       County       MORGAN       DMH Licensed       No         LAURIE       MO 65038-6024       Region 6       Facility Number       23915         ASHBURY HEIGHTS OF MONTGOMERY CITY         625 WEST 2ND ST       Telephone       (573) 564-3386       Alzheimer's Unit       No         MONTGOMERY CITY       MO 63361-1762       Level of Care:       RCF       Bed Capacity       12         Mailing Address 625 WEST 2ND ST       County       MONTGOMERY       DMH Licensed       No	299 HIGHWAY RA		<b>Telephone</b> (573) 374-0076	Alzheimer's Unit No
LAURIE         MO 65038-6024         Region 6         Facility Number         23915           ASHBURY HEIGHTS OF MONTGOMERY CITY           625 WEST 2ND ST         Telephone (573) 564-3386         Alzheimer's Unit         No           MONTGOMERY CITY         MO 63361-1762         Level of Care: RCF         Bed Capacity         12           Mailing Address 625 WEST 2ND ST         County         MONTGOMERY         DMH Licensed         No	LAURIE	MO 65038-6024	Level of Care: RCF	Bed Capacity 12
ASHBURY HEIGHTS OF MONTGOMERY CITY  625 WEST 2ND ST  MONTGOMERY CITY  MO 63361-1762  Moliling Address 625 WEST 2ND ST  County  MONTGOMERY	Mailing Address 299 HIGHWAY RA		County MORGAN	DMH Licensed No
625 WEST 2ND STTelephone $(573)$ 564-3386Alzheimer's UnitNoMONTGOMERY CITYMO 63361-1762Level of Care:RCFBed Capacity12Mailing Address 625 WEST 2ND STCounty $MONTGOMERY$ DMH LicensedNo	LAURIE	MO 65038-6024	Region 6	Facility Number 23915
Mailing Address 625 WEST 2ND ST         County         MONTGOMERY         DMH Licensed         No		MERY CITY	<b>Telephone</b> (573) 564-3386	Alzheimer's Unit No
·	MONTGOMERY CITY	MO 63361-1762	Level of Care: RCF	Bed Capacity 12
MONTGOMERY CITY MO 63361-1762 Region 6 Facility Number 20160	Mailing Address 625 WEST 2ND ST		County MONTGOMERY	DMH Licensed No
	MONTGOMERY CITY	MO 63361-1762	Region 6	Facility Number 20160

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ASHBURY HEIGHTS OF TIPTON		T-1	Al-L-iI-TIi4 N-
908 SOUTH PARK TIPTON	MO (5001 0400	<b>Telephone</b> (660) 433-6496	Alzheimer's Unit No Bed Capacity 12
	MO 65081-8408	Level of Care: RCF County MONITEAU	Bed Capacity 12  DMH Licensed No
Mailing Address 908 SOUTH PARK TIPTON	MO 65081-8408	Region 6	Facility Number 16506
TIFTON	WO 03081-8408	Kegion 0	Facility Number 10300
ASHLAND HEALTHCARE		TEMPORARY CLO	SURF - STAFFING
300 SOUTH HENRY CLAY BLVD		<b>Telephone</b> (573) 657-2877	Alzheimer's Unit No
ASHLAND	MO 65010-9438	Level of Care: SNF	Bed Capacity 60
Mailing Address 300 S HENRY CLAY		County BOONE	DMH Licensed No
ASHLAND	MO 65010-9438	Region 6 Medicare/Medicaid	Facility Number 17908
ASILAND	WO 03010-7430	Region o Medicare/Medicald	racinty Number 17908
ASHLAND VILLA - ASSISTED LIVI	NG BY AMERICARE		
301 SOUTH HENRY CLAY BLVD		<b>Telephone</b> (573) 657-1920	Alzheimer's Unit No
ASHLAND	MO 65010-9439	Level of Care: ALF**	<b>Bed Capacity</b> 72
Mailing Address 301 SOUTH HENRY	CLAY BLVD	County BOONE	DMH Licensed No
ASHLAND	MO 65010-9439	Region 6	Facility Number 20303
			•
ASHLEY MANOR CARE CENTER			
1630 RADIO HILL RD		<b>Telephone</b> (660) 882-6584	Alzheimer's Unit No
BOONVILLE	MO 65233-1957	Level of Care: SNF	<b>Bed Capacity</b> 52
Mailing Address 1630 RADIO HILL RI	D	County COOPER	<b>DMH Licensed</b> No
BOONVILLE	MO 65233-1957	Region 6 Medicare/Medicaid	Facility Number 00216
ASPEN VALLEY		T. 1. 1. (606) 246 0624	
1888 EAST 9TH STREET	NO 62000 2540	<b>Telephone</b> (696) 346-9634	Alzheimer's Unit YES
WASHINGTON	MO 63090-3549	Level of Care: ALF**	Bed Capacity 14
Mailing Address 1888 EAST 9TH STR		County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-3549	Region 6	Facility Number 32779
ASPIRE SENIOR LIVING ADVANCE	E		
315 SOUTH TILLEY ST		<b>Telephone</b> (573) 722-3440	Alzheimer's Unit No
ADVANCE	MO 63730-7230	Level of Care: SNF	Bed Capacity 70
Mailing Address 315 S TILLEY ST		County STODDARD	<b>DMH Licensed</b> No
ADVANCE	MO 63730-7230	Region 2 Medicare/Medicaid	Facility Number 11722
ASPIRE SENIOR LIVING EAST PRA	AIRIE		
186 MILLAR RD	150 - 500 15 1100	<b>Telephone</b> (573) 649-3551	Alzheimer's Unit No
EAST PRAIRIE	MO 63845-1180	Level of Care: SNF	Bed Capacity 70
Mailing Address PO BOX 299	MO (2045 0200	County MISSISSIPPI	DMH Licensed No
EAST PRAIRIE	MO 63845-0299	Region 2 Medicare/Medicaid	Facility Number 12083
ASPIRE SENIOR LIVING EXCELSION	OR SPRINGS		
1003 MEADOWLARK LN		<b>Telephone</b> (816) 630-3145	Alzheimer's Unit No
EXCELSIOR SPRINGS	MO 64024-3304	Level of Care: SNF	Bed Capacity 108
Mailing Address 1003 MEADOWLARI		County CLAY	DMH Licensed No
Extract grop approva			

Medicare/Medicaid

**Facility Number** 

19197

MO 64024-3304

EXCELSIOR SPRINGS

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ASPIRE SENIOR LIVING GERALD	,	TEMPORARY CLO	SURE - STAFFING
533 CANAAN ROAD		<b>Telephone</b> (573) 764-2135	Alzheimer's Unit No
GERALD	MO 63037-2515	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 180		County FRANKLIN	DMH Licensed No
GERALD	MO 63037-0180	Region 6 Medicare/Medicaid	Facility Number 13926
ASPIRE SENIOR LIVING JONESBU	URG		
308 CEDAR AVE		<b>Telephone</b> (636) 488-5400	Alzheimer's Unit Yes
JONESBURG	MO 63351-1126	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 218		County MONTGOMERY	DMH Licensed No
JONESBURG	MO 63351-0218	Region 6 Medicare/Medicaid	Facility Number 13265
ACRIDE CENTOR I INTEG MAI DEN	T		
ASPIRE SENIOR LIVING MALDEN 1209 STOKELAN	•	<b>Telephone</b> (573) 276-5115	Alzheimer's Unit Yes
MALDEN	MO 63863-1335	Level of Care: SNF	Bed Capacity 70
Mailing Address 1209 STOKELAN	WO 03003-1333	County DUNKLIN	DMH Licensed No
MALDEN	MO 63863-1335	Region 2 Medicare/Medicaid	Facility Number 12465
MEDEL	110 03003 1333	Region 2 Medical e/Medicald	racinty runner 12403
ASPIRE SENIOR LIVING MOBERI	X		
700 EAST URBANDALE DR		<b>Telephone</b> (660) 263-9060	Alzheimer's Unit Yes
MOBERLY	MO 65270-1966	Level of Care: SNF	Bed Capacity 120
Mailing Address 700 EAST URBAND		County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-1966	Region 5 Medicare/Medicaid	Facility Number 12523
		171Culcul O 171Culculu	12020
ASPIRE SENIOR LIVING OAK GRO	OVE		
2108 SOUTH MITCHELL		<b>Telephone</b> (816) 690-4118	Alzheimer's Unit Yes
OAK GROVE	MO 64075-9472	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 2108 S MITCHELL		County JACKSON	DMH Licensed No
OAK GROVE	MO 64075-9472	Region 3 Medicare/Medicaid	Facility Number 05849
ASPIRE SENIOR LIVING PLATTE	CITY		
220 O'ROURKE DRIVE		<b>Telephone</b> (816) 858-5222	Alzheimer's Unit No
PLATTE CITY	MO 64079-9360	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address PO BOX 1310		County PLATTE	<b>DMH Licensed</b> No
PLATTE CITY	MO 64079-1310	Region 4 Medicare/Medicaid	Facility Number 12655
ACCIOTED I IVINO AT OUADI DOC	VILLACE		
ASSISTED LIVING AT CHARLESS 5943 TELEGRAPH RD	VILLAGE	Tolonhous (214) 946 2002	Alcheiment-TI-:4
	MO 62120 4715	Telephone (314) 846-2002	Alzheimer's Unit No
SAINT LOUIS  Mailing Address 5042 TELECRAPH I	MO 63129-4715	Level of Care: ALF**	Bed Capacity 18
Mailing Address 5943 TELEGRAPH F		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63129-4715	Region 7	Facility Number 05586
ASSISTED LIVING AT THE MEAD	OWLANDS		
135 MEADOWLANDS ESTATES LN	- · · - · · · · · · · · · · · · · · · ·	<b>Telephone</b> (636) 978-3600	Alzheimer's Unit Yes
O'FALLON	MO 63366-4591	Level of Care: ALF**	Bed Capacity 86
Mailing Address 135 MEADOWLANI		County SAINT CHARLES	DMH Licensed No
O'FALLON	MO 63366-4591	Region 5	Facility Number 26475
- · ·	<del></del>		20173

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AUBURN CREEK - ASSISTED LIVE	ING BY AMERICARE			
2910 BEAVER CREEK DR		<b>Telephone</b> (573) 651-0199	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63701-1732	Level of Care: ALF	<b>Bed Capacity</b>	53
Mailing Address 2910 BEAVER CRE	EK DR	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-1732	Region 2	Facility Number 19	9892
A LIDVIDA DAD CE A MANG CENTER				
AUBURN RIDGE LIVING CENTER	t e e e e e e e e e e e e e e e e e e e	(570) (24 2021		
1425 ASHBURY WAY	MO (5101 1007	<b>Telephone</b> (573) 634-2031	Alzheimer's Unit	No
WARDSVILLE	MO 65101-1007	Level of Care: RCF	Bed Capacity	24
Mailing Address 1425 ASHBURY WARDSWILLE		County COLE	DMH Licensed	No
WARDSVILLE	MO 65101-1007	Region 6	Facility Number 31	1832
AURORA NURSING CENTER				
1700 SOUTH HUDSON AVE		<b>Telephone</b> (417) 678-2165	Alzheimer's Unit	Yes
AURORA	MO 65605-2717	Level of Care: SNF	<b>Bed Capacity</b>	125
Mailing Address 1700 S HUDSON A	VE	County LAWRENCE	DMH Licensed	No
AURORA	MO 65605-2717	Region 1 Medicare/Medicaid	Facility Number 00	0234
A LIPLIANI O A IZO CA DINIC CIENTELI				
AUTUMN OAKS CARING CENTER	C	T-11 (417) 026 5129	A 1-1	Vas
1310 HOVIS ST	MO (5711 1210	Telephone (417) 926-5128	Alzheimer's Unit	Yes
MOUNTAIN GROVE	MO 65711-1219	Level of Care: SNF	Bed Capacity	120
Mailing Address 1310 HOVIS ST	MO (5711 1210	County WRIGHT	DMH Licensed	No
MOUNTAIN GROVE	MO 65711-1219	Region 1 Medicare/Medicaid	Facility Number 07	7970
AUTUMN PLACE RESIDENTIAL (	CARE OF JOPLIN			
2030 E ZORA ST		<b>Telephone</b> (417) 626-8900	Alzheimer's Unit	No
JOPLIN	MO 64801-1170	Level of Care: RCF*	<b>Bed Capacity</b>	38
Mailing Address 2030 E ZORA ST		County JASPER	DMH Licensed	No
JOPLIN	MO 64801-1170	Region 1	Facility Number 20	0779
A LIPHANI DIDGE DECIDENCES				
AUTUMN RIDGE RESIDENCES 300 AUTUMN RIDGE DR		<b>Telephone</b> (636) 931-8400	Alzheimer's Unit	NT-
	MO 63048-1506	(***)		No 81
HERCULANEUM  Mailing Address 300 AUTUMN RIDO		Level of Care: RCF* County JEFFERSON	Bed Capacity DMH Licensed	Yes
HERCULANEUM	MO 63048-1506	Region 2		5845
HERCOLANEOW	WIO 03048-1300	Region 2	racinty Number	3643
AUTUMN VIEW GARDENS				
16219 AUTUMN VIEW TERRACE DI	R	<b>Telephone</b> (636) 458-5225	Alzheimer's Unit	Yes
ELLISVILLE	MO 63011-4743	Level of Care: ALF**	<b>Bed Capacity</b>	150
Mailing Address 16219 AUTUMN VI	EW TERRACE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE	MO 63011-4743	Region 7	Facility Number 20	0751
ATTRIMAL VIEW CARDENIC AP CO	HIETZ BOAD			
AUTUMN VIEW GARDENS AT SCI 11210 SCHUETZ RD	TUE LE KUAD	Talanhana (214) 002 0000	Alzhaiman'a IIi4	Yes
SAINT LOUIS	MO 63146-4933	Telephone (314) 993-9888 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	110
SAUNI LOUIS		Levelor Care: ALP***	DEU CADACILY	110
			_ :	Nι
Mailing Address 11210 SCHUETZ RI SAINT LOUIS		County SAINT LOUIS COUNTY Region 7	DMH Licensed	No 2909

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AUTUMN WOODS, INC				
5500 NW HOUSTON LAKE DR		<b>Telephone</b> (816) 587-2263	Alzheimer's Unit	No
KANSAS CITY	MO 64151-3472	Level of Care: RCF*	Bed Capacity	28
Mailing Address PO BOX 12008	WIO 04131-3472	County PLATTE	DMH Licensed	Yes
KANSAS CITY	MO 64152-0008			10857
KANSAS CII I	WIO 04132-0008	Region 4	Facility Number	10857
AVA PLACE				
1101 LYLE STREET		<b>Telephone</b> (417) 683-6999	Alzheimer's Unit	No
AVA	MO 65608-1269	Level of Care: RCF*	Bed Capacity	40
Mailing Address PO BOX 1269		County DOUGLAS	DMH Licensed	Yes
AVA	MO 65608-1269	Region 1	Facility Number	20718
AVALON GARDEN				
4359 TAFT AVE		<b>Telephone</b> (314) 752-2022	Alzheimer's Unit	No
SAINT LOUIS	MO 63116-1533	Level of Care: SNF	Bed Capacity	77
Mailing Address 4359 TAFT AVE	WIO 03110-1333	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63116-1533	Region 7 Medicare/Medicaid	Facility Number	00244
SAINI LOUIS	WIO 03110-1333	Region / Medicare/Medicald	racinty Number	00244
AVALON MEMORY CARE				
5342 BUTLER HILL ROAD		<b>Telephone</b> (314) 849-2985	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63128-4152	Level of Care: ALF**	<b>Bed Capacity</b>	30
Mailing Address 5342 BUTLER HILL	ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4152	Region 7	Facility Number	30425
BAILEY STREET RESIDENTIAL C	CARE I			
102 BAILEY ST		<b>Telephone</b> (573) 756-6374	Alzheimer's Unit	No
FARMINGTON	MO 63640-1819	Level of Care: RCF	Bed Capacity	12
Mailing Address 102 BAILEY ST		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-1819	Region 2	Facility Number	00256
BAISCH NURSING CENTER		T. I. I. (62.6) 50.6 220.1		
3260 BAISCH DR	110 (0000 701)	<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	Level of Care: SNF	Bed Capacity	61 N
Mailing Address 3260 BAISCH DR	110 (2000 504)	County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2 Medicare/Medicaid	Facility Number	00910
BAISCH NURSING CENTER				
3260 BAISCH DR		<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	Level of Care: RCF*	<b>Bed Capacity</b>	18
Mailing Address 3260 BAISCH DR		County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2	Facility Number	00910
BALLWIN RIDGE HEALTH & REF	<b>HABILITATION</b>			
1441 CHARIC DR		<b>Telephone</b> (636) 394-2522	Alzheimer's Unit	No
WILDWOOD	MO 63021-2001	Level of Care: SNF	Bed Capacity	66
Mailing Address 1441 CHARIC DR		County SAINT LOUIS COUNTY	DMH Licensed	No
-		•		

Medicare/Medicaid

**Facility Number** 

17887

MO 63021-2001

WILDWOOD

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BAPTIST HOME, THE				
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care: SNF	<b>Bed Capacity</b>	3
Mailing Address PO BOX 87		<b>County</b> IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2	<b>Facility Number</b>	00274
		-		
BAPTIST HOME, THE				
500 BAPTIST HOME LN		<b>Telephone</b> (660) 646-6219	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-3973	Level of Care: ICF	Bed Capacity	34
		County LIVINGSTON	DMH Licensed	No
Mailing Address 500 BAPTIST HOM CHILLICOTHE	MO 64601-3973	· · · ·		
CHILLICOTHE	MO 04001-3973	Region 4	Facility Number	14084
BAPTIST HOME, THE		T-11 (417) 501 0101	Aller to the TT to	3.7
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit	No
OZARK	MO 65721-6637	Level of Care: ALF**	Bed Capacity	30
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-1040	Region 1	Facility Number	21509
BAPTIST HOME, THE				
500 BAPTIST HOME LN		<b>Telephone</b> (660) 646-6219	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-3973	Level of Care: ALF**	Bed Capacity	20
Mailing Address 500 BAPTIST HOM	IE LN	County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number	14084
BAPTIST HOME, THE				
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit	No
OZARK	MO 65721-6637	Level of Care: ICF	Bed Capacity	33
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-1040	Region 1	Facility Number	21509
BAPTIST HOME, THE				
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care: ICF	Bed Capacity	53
Mailing Address PO BOX 87		County IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2	Facility Number	00274
BAPTIST HOME, THE				
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit	No
IRONTON	MO 63650-4338	Level of Care: ALF	<b>Bed Capacity</b>	56
Mailing Address PO BOX 87		County IRON	DMH Licensed	No
IRONTON	MO 63650-0087	Region 2	Facility Number	00274
BAPTIST HOMES OF INDEPENDI				
17451 MEDICAL CENTER PARKWA		<b>Telephone</b> (816) 373-7795	Alzheimer's Unit	NO
INDEPENDENCE	MO 64057-1805	Level of Care: RCF	Bed Capacity	20
Mailing Address 17451 MEDICAL C	ENTER PARKWAY	County JACKSON	DMH Licensed	No

**Facility Number** 

03782

MO 64057-1805

INDEPENDENCE

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BAPTIST HOMES OF INDEPENDENCE				
17451 MEDICAL CENTER PARKWAY	Telephone	(816) 373-7795	Alzheimer's Unit	No
INDEPENDENCE MO 64057			Bed Capacity	118
Mailing Address 17451 MEDICAL CENTER PRKW	•	JACKSON	DMH Licensed	No
INDEPENDENCE MO 64057	-1805 <b>Region</b> 3	Medicare/Medicaid	Facility Number	03782
BARATHAVEN ALZHEIMER'S SPECIAL CARE				
1030 BARATHAVEN DR	Telephone	(636) 329-9160	Alzheimer's Unit	Yes
DARDENNE PRAIRIE MO 63368	20,010101		Bed Capacity	66
Mailing Address 1030 BARATHAVEN DR	County	SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE MO 63368	-8606 <b>Region</b> 5		Facility Number	26902
DADNADAS ACDES				
BARNABAS ACRES 210 FRANKS LN	Telephone	(573) 803-8887	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701	•	` '	Bed Capacity	56
Mailing Address 210 FRANKS LN	County	CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU MO 63701	•	CAI E GIRARDEAU	Facility Number	05130
CAI E GIRARDEAU MO 03701	-0439 Region 2		Facility Number	03130
BARNABAS HOME, THE				
1301 MONROE ST	Telephone	(660) 646-5180	Alzheimer's Unit	No
CHILLICOTHE MO 64601	-1345 Level of Ca	re: RCF*	Bed Capacity	64
Mailing Address 1301 MONROE ST	County	LIVINGSTON	DMH Licensed	Yes
CHILLICOTHE MO 64601	·		Facility Number	04632
			·	
BARNABAS REDWOOD MANOR				
1194 LANDON RD	Telephone	(573) 468-8150	Alzheimer's Unit	No
BOURBON MO 65441	-8218 Level of Ca	re: RCF	Bed Capacity	47
Mailing Address 1194 LANDON RD	County	CRAWFORD	DMH Licensed	Yes
BOURBON MO 65441	-8218 <b>Region</b> 6		Facility Number	08609
BARNES-JEWISH EXTENDED CARE 401 CORPORATE PARK DR	Telephone	(214) 725 7447	Alzheimer's Unit	Ma
	•	(314) 725-7447		No
SAINT LOUIS MO 63105			Bed Capacity	120
Mailing Address 401 CORPORATE PARK DR SAINT LOUIS MO 63105	County	SAINT LOUIS COUNTY	DMH Licensed Facility Number	No
SAINI LOUIS MO 6510.	-4201 <b>Region</b> 7	Medicare/Medicaid	racmty Number	15878
BAYLESS BOARDING HOME				
3719 SAND CREEK ROAD	Telephone	(573) 747-0889	Alzheimer's Unit	No
FARMINGTON MO 63640	1-7349 Level of Ca	re: RCF	Bed Capacity	12
Mailing Address 3719 SAND CREEK RD	County	SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON MO 63640	-7349 <b>Region</b> 2		Facility Number	17300
BEACON HILL RESIDENTIAL CARE	70.1. Y	(016) 521 6160	Alabatana to TV	N.T.
2905 CAMPBELL	Telephone	(816) 531-6168	Alzheimer's Unit	No
KANSAS CITY MO 64109			Bed Capacity	37 V
Mailing Address 2905 CAMPBELL	•	JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64109	-1417 <b>Region</b> 3		Facility Number	00329

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DEALITICITY CAVIOD HOME				
BEAUTIFUL SAVIOR HOME 1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit	No
BELTON	MO 64012-3703	Level of Care: SNF	Bed Capacity	126
Mailing Address 1003 S CEDAR ST	WIO 04012-3703	County CASS	DMH Licensed	No
BELTON	MO 64012-3703	•	Facility Number	00342
BELION	WO 04012-5705	Region 3 Medicare/Medicaid	racinty Number	00342
BEAUTIFUL SAVIOR HOME				
1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit	No
BELTON	MO 64012-3703	Level of Care: ALF	Bed Capacity	55
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed	No
BELTON	MO 64012-3703	Region 3	Facility Number	00342
		region -	Tuestey Transpor	00312
BEAUVAIS REHAB AND HEALTHO	CARE CENTER			
3625 MAGNOLIA AVE		<b>Telephone</b> (314) 771-2990	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63110-4048	Level of Care: SNF	<b>Bed Capacity</b>	184
Mailing Address 3625 MAGNOLIA A	VE	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63110-4048	Region 7 Medicare/Medicaid	Facility Number	09528
DELL EDOLUTA DEL CARDENO	CINIC A DEWAR	mm. man . mr. a. a	CALLED COLLEGE	
BELLEFONTAINE GARDENS NUR	SING & REHAB	TEMPORARY CLO		3.7
9500 BELLEFONTAINE RD	NO (2127 122 (	<b>Telephone</b> (314) 388-0796	Alzheimer's Unit	No
SAINT LOUIS	MO 63137-1336	Level of Care: SNF	Bed Capacity	96
Mailing Address 9500 BELLEFONTAL		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63137-1336	Region 7 Medicare/Medicaid	Facility Number	02598
BELLEVIEW VALLEY NURSING H	IOME			
23144 HIGHWAY 32		<b>Telephone</b> (573) 697-5311	Alzheimer's Unit	No
BELLEVIEW	MO 63623-6346	Level of Care: SNF	<b>Bed Capacity</b>	122
Mailing Address 23144 HIGHWAY 32		County IRON	DMH Licensed	No
BELLEVIEW	MO 63623-6346	Region 2 Medicare/Medicaid	Facility Number	00382
DELOVED HEALTH AND DEHADI	TITATION CENTED			
BELOVED HEALTH AND REHABII	LITATION CENTER	Talanhana (572) 221 0122	Alzheimer's Unit	No
328 MUNGER LANE		Telephone (573) 221-9122	Alzheimer's Unit	No
328 MUNGER LANE HANNIBAL	MO 63401-2361	Level of Care: SNF	<b>Bed Capacity</b>	111
328 MUNGER LANE HANNIBAL <b>Mailing Address</b> 328 MUNGER LANE	MO 63401-2361	Level of Care: SNF County MARION	Bed Capacity DMH Licensed	111 No
328 MUNGER LANE HANNIBAL	MO 63401-2361	Level of Care: SNF	<b>Bed Capacity</b>	111
328 MUNGER LANE HANNIBAL <b>Mailing Address</b> 328 MUNGER LANE	MO 63401-2361 MO 63401-2361	Level of Care: SNF County MARION	Bed Capacity DMH Licensed	111 No
328 MUNGER LANE HANNIBAL <b>Mailing Address</b> 328 MUNGER LANE HANNIBAL	MO 63401-2361 MO 63401-2361	Level of Care: SNF County MARION	Bed Capacity DMH Licensed	111 No
328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT	MO 63401-2361 MO 63401-2361	Level of Care: SNF County MARION Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	111 No 03340
328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND	MO 63401-2361 MO 63401-2361 ER	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	111 No 03340 No
328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS	MO 63401-2361 MO 63401-2361 ER	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	111 No 03340 No 15
328 MUNGER LANE HANNIBAL  Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS  Mailing Address 3863 CLEVELAND SAINT LOUIS	MO 63401-2361  MO 63401-2361  ER  MO 63110-4009	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	111 No 03340 No 15 Yes
328 MUNGER LANE HANNIBAL  Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS  Mailing Address 3863 CLEVELAND SAINT LOUIS  BENTLEYS EXTENDED CARE	MO 63401-2361  MO 63401-2361  ER  MO 63110-4009	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 03340 No 15 Yes 21163
328 MUNGER LANE HANNIBAL  Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS  Mailing Address 3863 CLEVELAND SAINT LOUIS	MO 63401-2361  MO 63401-2361  ER  MO 63110-4009	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7  Telephone (314) 426-0433	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	111 No 03340 No 15 Yes
328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS  BENTLEYS EXTENDED CARE 3060 ASHBY ROAD OVERLAND	MO 63401-2361  MO 63401-2361  ER  MO 63110-4009  MO 63110-4009	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7  Telephone (314) 426-0433 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 15 Yes 21163
328 MUNGER LANE HANNIBAL Mailing Address 328 MUNGER LANE HANNIBAL  BENEDICT JOSEPH LABRE CENT 3863 CLEVELAND SAINT LOUIS Mailing Address 3863 CLEVELAND SAINT LOUIS  BENTLEYS EXTENDED CARE 3060 ASHBY ROAD	MO 63401-2361  MO 63401-2361  ER  MO 63110-4009  MO 63110-4009	Level of Care: SNF County MARION Region 5 Medicare/Medicaid  Telephone (314) 664-3927 Level of Care: RCF County SAINT LOUIS CITY Region 7  Telephone (314) 426-0433	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 15 Yes 21163

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BENTON HOUSE OF BLUE SPRINGS			
1701 NW JEFFERSON ST	<b>Telephone</b> (816) 224-2727	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-7229	<b>Level of Care:</b> ALF**	Bed Capacity	95
Mailing Address 1701 NW JEFFERSON ST	<b>County</b> JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-7229	Region 3	Facility Number	29729
BENTON HOUSE OF RAYMORE			
2100 JOHNSTON DR	<b>Telephone</b> (816) 322-2111	Alzheimer's Unit	Yes
RAYMORE MO 64083-8122	Level of Care: ALF**	<b>Bed Capacity</b>	95
Mailing Address 2100 JOHNSTON DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-8122	<b>Region</b> 3	<b>Facility Number</b>	29896
BENTON HOUSE OF STALEY HILLS			
11071 N WOODLAND AVE	<b>Telephone</b> (816) 372-1888	Alzheimer's Unit	Yes
KANSAS CITY MO 64155-1552	Level of Care: ALF**	<b>Bed Capacity</b>	80
Mailing Address 11071 N WOODLAND AVE	County CLAY	DMH Licensed	No
KANSAS CITY MO 64155-1552	Region 4	<b>Facility Number</b>	30774
	ū		
BENTON HOUSE OF TIFFANY SPRINGS			
5901 NW 88TH ST	<b>Telephone</b> (816) 505-4555	Alzheimer's Unit	Yes
KANSAS CITY MO 64154-1607	Level of Care: ALF**	Bed Capacity	80
Mailing Address 5901 NW 88TH ST	County PLATTE	DMH Licensed	No
KANSAS CITY MO 64154-1607	Region 4	Facility Number	29519
112 (0.12 1.130)	Region .	ruemty rumber	2)31)
BENTWOOD NURSING & REHAB			
1501 CHARBONIER RD	<b>Telephone</b> (314) 921-2700	Alzheimer's Unit	No
FLORISSANT MO 63031-5308	Level of Care: SNF	Bed Capacity	116
Mailing Address 1501 CHARBONIER RD	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 63031-5308	Region 7 Medicare/Medicaid	Facility Number	14817
TEORISSANT MO 03031-3300	Region / Medicare/Medicard	racinty rumber	1401/
BERNARD CARE CENTER			
4335 WEST PINE BLVD	<b>Telephone</b> (314) 371-0200	Alzheimer's Unit	No
SAINT LOUIS MO 63108-2205	Level of Care: SNF	Bed Capacity	141
Mailing Address 4335 WEST PINE BLVD	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63108-2205	Region 7 Medicare/Medicaid	Facility Number	00436
SAINT LOUIS MO 03100-2203	Region / Medicare/Medicaid	racinty Number	00430
DEDTO AND MUDGING AND DEHAD CENTED			
BERTRAND NURSING AND REHAB CENTER 603 WEST HIGHWAY 62	<b>Telephone</b> (573) 683-4290	Alaboimonia Tinit	No
		Alzheimer's Unit	No
BERTRAND MO 63823-9738	Level of Care: SNF	Bed Capacity	60
Mailing Address 603 WEST HIGHWAY 62	County MISSISSIPPI	DMH Licensed	No
BERTRAND MO 63823-9738	Region 2 Medicare/Medicaid	Facility Number	00440
DETENTION AND AND AND AND AND AND AND AND AND AN			
BETH HAVEN NURSING HOME 2500 PLEASANT ST	<b>Telephone</b> (573) 221-6000	Alzheimer's Unit	Yes
HANNIBAL MO 63401-2600	Level of Care: SNF	Bed Capacity	105
Mailing Address 2500 PLEASANT ST	County MARION	DMH Licensed	No
HANNIBAL MO 63401-2600	Region 5 Medicare/Medicaid	Facility Number	00469
11/11/11/11/11/11/11/11/11/11/11/11/11/	Region 5 Medicare/Medicald	racinty Muniper	00409

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BETHESDA DILWORTH				
9645 BIG BEND BLVD		<b>Telephone</b> (314) 968-5460	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63122-6521	Level of Care: SNF	Bed Capacity	400
Mailing Address 9645 BIG BEND BLV		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63122-6521	Region 7 Medicare/Medicaid	Facility Number	00508
BETHESDA HAWTHORNE PLACE				
		The Late (214) 042 5750	A1 1	<b>V</b>
1111 SOUTH BERRY ROAD	MO (2122 (500	<b>Telephone</b> (314) 942-5750	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63122-6598	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1111 SOUTH BERRY		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63122-6598	Region 7	Facility Number	30509
BETHESDA MEADOW				
322 OLD STATE ROAD		<b>Telephone</b> (636) 227-3431	Alzheimer's Unit	Yes
ELLISVILLE	MO 63021-5917	Level of Care: SNF	Bed Capacity	210
		County SAINT LOUIS COUNTY	DMH Licensed	No No
Mailing Address 322 OLD STATE ROA		•		
ELLISVILLE	MO 63021-5917	Region 7 Medicare/Medicaid	Facility Number	15226
BETHESDA SOUTHGATE				
5943 TELEGRAPH RD		<b>Telephone</b> (314) 846-2000	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63129-4715	Level of Care: SNF	Bed Capacity	192
Mailing Address 5943 TELEGRAPH R		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63129-4715	Region 7 Medicare/Medicaid	Facility Number	05586
SAINT LOOIS	WO 03127-4713	Region / Wedicare/Medicaid	racinty Number	03380
BIG BEND RETREAT				
620 NORTH EMMERSON		<b>Telephone</b> (660) 529-2237	Alzheimer's Unit	No
SLATER	MO 65349-1157	Level of Care: RCF*	<b>Bed Capacity</b>	10
Mailing Address 620 NORTH EMMER	RSON	County SALINE	DMH Licensed	No
SLATER	MO 65349-1157	Region 5	Facility Number	00546
DIG DEND DETERMAN				
BIG BEND RETREAT		T. 1 (650) 700 0007		
620 NORTH EMMERSON	150	<b>Telephone</b> (660) 529-2237	Alzheimer's Unit	No
SLATER	MO 65349-1157	Level of Care: ICF	Bed Capacity	60
Mailing Address 620 NORTH EMMER	RSON	County SALINE	DMH Licensed	No
SLATER	MO 65349-1157	Region 5	Facility Number	00546
BIG BEND WOODS HEALTHCARE	CENTER			
110 HIGHLAND AVE		<b>Telephone</b> (636) 529-8300	Alzheimer's Unit	No
VALLEY PARK	MO 63088-1422	Level of Care: SNF	Bed Capacity	135
Mailing Address 110 HIGHLAND AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
-		•		
VALLEY PARK	MO 63088-1422	Region 7 Medicare/Medicaid	Facility Number	01170
BIG PRAIRIE ASSISTED LIVING, L	LC			
411 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 471-5503	Alzheimer's Unit	No
SIKESTON	MO 63801-	Level of Care: ALF	<b>Bed Capacity</b>	36
Mailing Address PO BOX 909		County SCOTT	DMH Licensed	Yes

**Facility Number** 

03229

MO 63801-0909

SIKESTON

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BIG RIVER NURSING & REHAB			
6400 THE CEDARS COURT		<b>Telephone</b> (636) 274-1777	Alzheimer's Unit Yes
CEDAR HILL	MO 63016-2220	Level of Care: SNF	<b>Bed Capacity</b> 150
Mailing Address 6400 THE CEDARS 0	CT	<b>County</b> JEFFERSON	<b>DMH Licensed</b> No
CEDAR HILL	MO 63016-2220	Region 2 Medicare/Medicaid	Facility Number 12647
BIG SPRING CARE CENTER FOR R	REHAB AND HEALTHCARE		
202 EAST MILL ST		<b>Telephone</b> (417) 754-8711	Alzheimer's Unit No
HUMANSVILLE	MO 65674-8507	Level of Care: SNF	Bed Capacity 60
Mailing Address 202 EAST MILL ST	1.00	County POLK	DMH Licensed No
HUMANSVILLE	MO 65674-8507	Region 1 Medicare/Medicaid	Facility Number 18672
BIRCH POINTE HEALTH AND REH	IABILITATION		
3705 S JEFFERSON AVE		<b>Telephone</b> (417) 889-0773	Alzheimer's Unit Yes
SPRINGFIELD	MO 65807-5880	Level of Care: SNF	Bed Capacity 120
Mailing Address 3705 S JEFFERSON A	AVE	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-5880	Region 1 Medicare/Medicaid	Facility Number 31013
		ang.on anatom.on.	01010
BISHOP SPENCER PLACE, INC, TH	Œ		
4301 MADISON AVE		<b>Telephone</b> (816) 931-4277	Alzheimer's Unit No
KANSAS CITY	MO 64111-3491	Level of Care: ALF**	Bed Capacity 40
Mailing Address 4301 MADISON AVE	E	County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64111-3491	Region 3	Facility Number 20635
BISHOP SPENCER PLACE, INC, TH	IE		
4301 MADISON AVE		<b>Telephone</b> (816) 931-4277	Alzheimer's Unit No
KANSAS CITY	MO 64111-3491	Level of Care: SNF	Bed Capacity 57
Mailing Address 4301 MADISON AVE	3	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64111-3491	Region 3 Medicare/Medicaid	Facility Number 20635
N. Pager Wolfing			
BLESSED HOMES		T. I. 1 (01.6) 670 0061	A11.
305 E 63RD ST	MO (4112 2225	<b>Telephone</b> (816) 678-8061	Alzheimer's Unit No
KANSAS CITY	MO 64113-2225	Level of Care: RCF	Bed Capacity 11
Mailing Address 305 E 63RD ST	MO (4112 2225	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64113-2225	Region 3	Facility Number 27175
BLESSING CENTER, THE			
302 NORTH MAIN		<b>Telephone</b> (660) 397-2293	Alzheimer's Unit No
EDINA	MO 63537-1353	Level of Care: RCF	<b>Bed Capacity</b> 51
Mailing Address 302 NORTH MAIN		County KNOX	DMH Licensed Yes
EDINA	MO 63537-1353	Region 5	Facility Number 03728
BLOOMFIELD LIVING CENTER		TEMPORARY CLO	SURE - STAFFING
606 WEST MISSOURI ST		<b>Telephone</b> (573) 568-2137	Alzheimer's Unit No
BLOOMFIELD	MO 63825-9706	Level of Care: SNF	Bed Capacity 60
Mailing Address 606 WEST MISSOUR		County STODDARD	DMH Licensed No

Medicare/Medicaid

**Facility Number** 

00629

MO 63825-9706

BLOOMFIELD

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BLUE CASTLE BOLIVAR LLC			
1830 E LAVERNE ST	<b>Telephone</b> (417) 777-2583	Alzheimer's Unit	No
BOLIVAR MO 65613-1488	Level of Care: RCF*	Bed Capacity	30
Mailing Address 1830 E LAVERNE ST	County POLK	DMH Licensed	Yes
BOLIVAR MO 65613-1488	Region 1	Facility Number	24698
BLUE CIRCLE REHAB AND NURSING			
2939 MAGAZINE STREET	<b>Telephone</b> (314) 531-0500	Alzheimer's Unit	No
SAINT LOUIS MO 63106-1245	Level of Care: SNF	Bed Capacity	90
Mailing Address 2939 MAGAZINE STREET	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 63106-1245	Region 7 Medicare/Medicaid	Facility Number	15258
BLUE HILLS REST HOME, INC			
2207 NORTH BLUE MILLS RD	<b>Telephone</b> (816) 796-3376	Alzheimer's Unit	No
INDEPENDENCE MO 64058-2022	Level of Care: ALF**	Bed Capacity	63
Mailing Address 2207 N BLUE MILLS RD	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64058-2022	Region 3	Facility Number	11146
	Region		11110
BLUEGRASS TERRACE			
102 REDTAIL DR	<b>Telephone</b> (573) 657-0899	Alzheimer's Unit	No
ASHLAND MO 65010-1179	Level of Care: RCF	Bed Capacity	16
Mailing Address 102 REDTAIL DR	County BOONE	DMH Licensed	No
ASHLAND MO 65010-1179	Region 6	Facility Number	25731
HO GOOT IT!	Region	racinty runner	23731
RI HEE CREEK TERRACE - ASSISTED I IVING RV AMERICARE			
BLUFF CREEK TERRACE - ASSISTED LIVING BY AMERICARE	Telephone (573) 815-9111	Alzheimer's Unit	Ves
3104 BLUFF CREEK DR	Telephone (573) 815-9111 Level of Care: ALF**	Alzheimer's Unit	Yes 48
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	Level of Care: ALF**	Bed Capacity	48
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR	Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed	48 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	Level of Care: ALF**	Bed Capacity	48
3104 BLUFF CREEK DR COLUMBIA  MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA  MO 65201-3524	Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed	48 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524 BLUFFS, THE	Level of Care: ALF** County BOONE Region 6	Bed Capacity DMH Licensed Facility Number	48 No 20625
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	48 No 20625 Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132
3104 BLUFF CREEK DR COLUMBIA  Mo 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA  MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA  MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA  MO 65201-3529	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD  OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No 00754 No 40 Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	48 No 20625 Yes 132 No 00754
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	48 No 20625 Yes 132 No 00754 No 40 Yes
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  BOLIVAR MANOR HOUSE 404 EAST BROADWAY	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (417) 327-5790	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 65114-3328  BOLIVAR MANOR HOUSE 404 EAST BROADWAY BOLIVAR MO 65613-2019	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (417) 327-5790 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709
3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524  BLUFFS, THE 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  Mailing Address 3105 BLUFF CREEK DR COLUMBIA MO 65201-3529  BOARDING INN, THE 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  Mailing Address 9444 MIDLAND BLVD OVERLAND MO 63114-3328  BOLIVAR MANOR HOUSE 404 EAST BROADWAY	Level of Care: ALF** County BOONE Region 6  Telephone (573) 442-6060 Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (314) 426-0091 Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (417) 327-5790	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	48 No 20625 Yes 132 No 00754 No 40 Yes 00709

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BOULEVARD SENIOR LIVING OF	ST CHARLES		
3340 EHLMANN ROAD		<b>Telephone</b> (636) 757-5077	<b>Alzheimer's Unit</b> Yes
SAINT CHARLES	MO 63301-4087	Level of Care: ALF**	<b>Bed Capacity</b> 128
Mailing Address 3340 EHLMANN RO		County SAINT CHARLES	<b>DMH Licensed</b> No
SAINT CHARLES	MO 63301-4087	Region 5	Facility Number 31029
BOULEVARD SENIOR LIVING OF	WENTZVILLE		
120 PERRY CATE BOULEVARD		<b>Telephone</b> (636) 698-9458	Alzheimer's Unit Yes
WENTZVILLE	MO 63385-4719	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 120 PERRY CATE B	OULEVARD	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-4719	Region 5	Facility Number 31404
		8	
BOWLING GREEN RESIDENTIAL	CARE		
119 WEST CENTENNIAL AVE		<b>Telephone</b> (573) 324-5560	Alzheimer's Unit No
BOWLING GREEN	MO 63334-1605	Level of Care: RCF*	Bed Capacity 25
Mailing Address 119 WEST CENTEN		County PIKE	DMH Licensed Yes
BOWLING GREEN	MO 63334-1605	Region 5	Facility Number 07712
BRADFORD COURT - ASSISTED LI	IVING BY AMERICARE		
902 NORTH MAIN		<b>Telephone</b> (417) 725-0177	Alzheimer's Unit No
NIXA	MO 65714-9384	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 902 NORTH MAIN		County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9384	Region 1	Facility Number 17732
BRENT B TINNIN MANOR			
220 EUEL POLK DR		<b>Telephone</b> (573) 663-2545	Alzheimer's Unit No
ELLINGTON	MO 63638-7967	Level of Care: SNF	Bed Capacity 60
Mailing Address 220 EUEL POLK DR		County REYNOLDS	DMH Licensed No
ELLINGTON	MO 63638-7967	Region 2 Medicare/Medicaid	Facility Number 08027
			•
BRENTMOOR RETIREMENT COM	IMUNITY	m	
8600 DELMAR BLVD	MO	<b>Telephone</b> (314) 995-3811	Alzheimer's Unit No
SAINT LOUIS	MO 63124-1973	Level of Care: ALF**	Bed Capacity 36
Mailing Address 8600 DELMAR BLV		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63124-1973	Region 7	Facility Number 19968
BRIDGEWAY RESIDENTIAL CARE	E FACILITY		
828 JEFFERSON ST		<b>Telephone</b> (573) 642-7770	Alzheimer's Unit No
FULTON	MO 65251-1877	Level of Care: RCF*	Bed Capacity 94
Mailing Address 828 JEFFERSON ST		County CALLAWAY	DMH Licensed Yes
FULTON	MO 65251-1877	Region 6	Facility Number 13522
BRIDGEWOOD HEALTH CARE CE	NTER		
11515 TROOST	ATILA	<b>Telephone</b> (816) 943-0101	Alzheimer's Unit Yes
KANSAS CITY	MO 64131-3769	Level of Care: SNF	Bed Capacity 166
Mailing Address 11515 TROOST	2	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64131-3769	Region 3 Medicare/Medicaid	Facility Number 06555
	0.101 0.107	region - medical C/Medicalu	- nome, 1.minor 00333

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BRISTOL MANOR OF AURORA			
740 SOUTH HUDSON		<b>Telephone</b> (417) 678-7535	Alzheimer's Unit No
	MO (5(05 2512	• '	
AURORA	MO 65605-2512		· · · · · · · · · · · · · · · · · · ·
Mailing Address 740 SOUTH HUDSO		County LAWRENCE	DMH Licensed No
AURORA	MO 65605-2512	Region 1	Facility Number 20352
BRISTOL MANOR OF BETHANY 811 SOUTH 24TH ST		<b>Telephone</b> (660) 425-7133	Alzheimer's Unit No
BETHANY	MO 64424-2631	Level of Care: RCF	Bed Capacity 12
Mailing Address 811 SOUTH 24TH ST			DMH Licensed No
BETHANY			
BETHANT	MO 64424-2631	Region 4	Facility Number 19068
BRISTOL MANOR OF BOONVILLE			
1290 ASHLEY RD	-	<b>Telephone</b> (660) 882-3393	Alzheimer's Unit No
BOONVILLE	MO 65233-2108	Level of Care: RCF	Bed Capacity 12
Mailing Address 1290 ASHLEY RD	N10 03233 2100	County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2108	Region 6	
BOONVILLE	WO 03233-2108	kegion 0	Facility Number 17310
BRISTOL MANOR OF BROOKFIEL	.D		
338 THOMPSON		<b>Telephone</b> (660) 258-5065	Alzheimer's Unit No
BROOKFIELD	MO 64628-2419	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 338 THOMPSON		County LINN	DMH Licensed No
BROOKFIELD	MO 64628-2419	Region 5	Facility Number 18666
DROOM ELD	110 01020 211)	Region 5	racinty (unificial 19000)
BRISTOL MANOR OF BUFFALO			
1002 SOUTH BIRCH		<b>Telephone</b> (417) 345-5500	Alzheimer's Unit No
BUFFALO	MO 65622-9455	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1002 SOUTH BIRCH		County DALLAS	DMH Licensed No
BUFFALO	MO 65622-9455	Region 1	Facility Number 18142
BRISTOL MANOR OF BUTLER 411 SOUTH DELAWARE		<b>Telephone</b> (660) 679-3661	Alzheimer's Unit No
BUTLER	MO 64730-2311	Level of Care: RCF	Bed Capacity 12
Mailing Address 411 S DELAWARE	N10 04730-2311	County BATES	DMH Licensed No
BUTLER	MO 64730-2311		Facility Number 18817
DUILER	WO 04/30-2311	Region 3	Facility Number 1881/
BRISTOL MANOR OF CALIFORNI	A		
605 PARKVIEW DR		<b>Telephone</b> (573) 796-4342	Alzheimer's Unit No
CALIFORNIA	MO 65018-2001	Level of Care: RCF	Bed Capacity 12
Mailing Address 605 PARKVIEW DR		County MONITEAU	DMH Licensed No
CALIFORNIA	MO 65018-2001	Region 6	Facility Number 17401
		ATTENDED OF	
BRISTOL MANOR OF CAMDENTO	N		
75 FOURTH ST		<b>Telephone</b> (573) 346-6800	Alzheimer's Unit No
CAMDENTON	MO 65020-6891	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 75 FOURTH ST		County CAMDEN	DMH Licensed No
CAMDENTON	MO 65020-6891	Region 6	Facility Number 17914

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BRISTOL MANOR OF CAMERON			
920 NORTH HARRIS		<b>Telephone</b> (816) 632-6133	Alzheimer's Unit No
CAMERON	MO 64429-1145	Telephone (816) 632-6133 Level of Care: RCF	Bed Capacity 12
Mailing Address 920 NORTH HARRIS		County DEKALB	DMH Licensed No
CAMERON	MO 64429-1145		Facility Number 18295
CAMERON	WO 04429-1143	Region 4	racinty Number 18295
BRISTOL MANOR OF CARROLLTO	)N		
1016 EAST 10TH ST		<b>Telephone</b> (660) 542-2349	Alzheimer's Unit No
CARROLLTON	MO 64633-9348	Level of Care: RCF	Bed Capacity 12
Mailing Address 1016 EAST 10TH ST		County CARROLL	DMH Licensed No
CARROLLTON	MO 64633-9348	Region 4	Facility Number 18316
BRISTOL MANOR OF CARTHAGE			
2131 SOUTH RIVER AVE		<b>Telephone</b> (417) 358-9788	Alzheimer's Unit No
CARTHAGE	MO 64836-3350	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 2131 S RIVER AVE		County JASPER	DMH Licensed Yes
CARTHAGE	MO 64836-3350	Region 1	Facility Number 20858
			2000
BRISTOL MANOR OF CENTRALIA		TELL (572) (92 5012	All the transfer of the Ni-
610 NORTH JEFFERSON ST	MO 65240 1170	<b>Telephone</b> (573) 682-5913	Alzheimer's Unit No
CENTRALIA	MO 65240-1178	Level of Care: RCF	Bed Capacity 12
Mailing Address 610 NORTH JEFFERS CENTRALIA		County BOONE	DMH Licensed No
CENTRALIA	MO 65240-1178	Region 6	Facility Number 18286
BRISTOL MANOR OF CLINTON			
1402 EAST FRANKLIN		<b>Telephone</b> (660) 885-8391	Alzheimer's Unit No
CLINTON	MO 64735-1768	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1402 EAST FRANKL	IN	County HENRY	DMH Licensed No
CLINTON	MO 64735-1768	Region 1	Facility Number 16656
BRISTOL MANOR OF ELDON			
1201 EAST NORTH ST		<b>Telephone</b> (573) 392-1200	Alzheimer's Unit No
ELDON	MO 65026-2651	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1201 EAST NORTH S	T	County MILLER	DMH Licensed No
ELDON	MO 65026-2651	Region 6	Facility Number 17701
BRISTOL MANOR OF ELSBERRY			
1402 RIVERVIEW DR		<b>Telephone</b> (573) 898-5955	Alzheimer's Unit No
ELSBERRY	MO 63343-1612	Level of Care: RCF	Bed Capacity 12
Mailing Address 1402 RIVERVIEW DI	₹	County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-1612	Region 5	Facility Number 20015
BRISTOL MANOR OF FULTON			
750 SIGN PAINTER ROAD		<b>Telephone</b> (573) 642-7557	Alzheimer's Unit No
FULTON	MO 65251-2514	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 750 SIGN PAINTER F	RD	County CALLAWAY	<b>DMH Licensed</b> No
FULTON	MO 65251-2514	Region 6	Facility Number 18575

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BRISTOL MANOR OF HOLDEN			
501 WEST SECOND		<b>Telephone</b> (816) 732-6789	Alzheimer's Unit No
HOLDEN Me	O 64040-1205	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 501 WEST SECOND		County JOHNSON	<b>DMH Licensed</b> No
HOLDEN MO	O 64040-1205	Region 3	Facility Number 17951
BRISTOL MANOR OF JEFFERSON CIT	Ϋ́Y		
510 KENSINGTON PARK		<b>Telephone</b> (573) 761-5772	Alzheimer's Unit No
	O 65109-6247	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 510 KENSINGTON PARK		County COLE	<b>DMH Licensed</b> No
JEFFERSON CITY MO	O 65109-6247	Region 6	Facility Number 20116
BRISTOL MANOR OF LAMAR			
603 EAST 17TH ST		<b>Telephone</b> (417) 682-6762	Alzheimer's Unit No
	O 64759-2303	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 EAST 17TH ST	0 04737-2303	County BARTON	DMH Licensed No
	O 64759-2303	Region 1	Facility Number 18951
DA INTERNAL TOTAL	0 04737 2303	Region 1	Tacinty Number
BRISTOL MANOR OF LEXINGTON			
2615 MAIN ST		<b>Telephone</b> (660) 259-6655	Alzheimer's Unit No
LEXINGTON MO	O 64067-1974	Level of Care: RCF	Bed Capacity 12
Mailing Address 2615 MAIN ST		County LAFAYETTE	DMH Licensed No
LEXINGTON MO	O 64067-1974	Region 3	Facility Number 17543
		S	•
BRISTOL MANOR OF LINCOLN			
204 SOUTH HIGHWAY 65		<b>Telephone</b> (660) 547-2580	Alzheimer's Unit No
	O 65338-2587	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 204 SOUTH HIGHWAY 6		County BENTON	<b>DMH Licensed</b> No
LINCOLN MO	O 65338-2587	Region 6	Facility Number 18092
BRISTOL MANOR OF MACON			
707 RANCHLAND DR		<b>Telephone</b> (660) 385-3020	Alzheimer's Unit No
	O 63552-1994	Level of Care: RCF	Bed Capacity 12
Mailing Address 707 RANCHLAND DR		County MACON	DMH Licensed No
o .	O 63552-1994	Region 5	Facility Number 17865
BRISTOL MANOR OF MARCELINE			
102 EAST HAYDEN		<b>Telephone</b> (660) 376-2210	Alzheimer's Unit No
MARCELINE MO	O 64658-2003	Level of Care: RCF	Bed Capacity 12
Mailing Address 102 EAST HAYDEN		County LINN	DMH Licensed No
MARCELINE Me	O 64658-2003	Region 5	Facility Number 17764
BRISTOL MANOR OF MARYVILLE			
323 EAST SUMMIT DR		<b>Telephone</b> (660) 582-4131	Alzheimer's Unit No
	O 64468-3619	Level of Care: RCF	Bed Capacity 12
Mailing Address 323 EAST SUMMIT DR	0 01700 3017	County NODAWAY	DMH Licensed No
	O 64468-3619	Region 4	Facility Number 19843
WILL A HELL	0 01700 3017	region 7	19043

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BRISTOL MANOR OF MONROE CI 1017 EAST LAWN ST	TY	<b>Telephone</b> (573) 735-3068	Alzheimer's Unit No
MONROE CITY	MO 63456-1433	Telephone (573) 735-3068 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12
Mailing Address 1017 EAST LAWN S		County MONROE	DMH Licensed Yes
MONROE CITY	MO 63456-1433	Region 5	Facility Number 20045
MONROL CITT	110 03430-1433	Kegion 5	racinty Number 20045
BRISTOL MANOR OF NEVADA			
401 EAST WALNUT		<b>Telephone</b> (417) 667-5700	Alzheimer's Unit No
NEVADA	MO 64772-2457	Level of Care: RCF	Bed Capacity 12
Mailing Address 401 EAST WALNUT		County VERNON	DMH Licensed Yes
NEVADA	MO 64772-2457	Region 1	Facility Number 18471
BRISTOL MANOR OF OAK GROVE 300 NORTH AUSTIN	Ε	<b>Telephone</b> (816) 625-8691	<b>Alzheimer's Unit</b> No
OAK GROVE	MO 64075-8109	Level of Care: RCF	Bed Capacity 12
Mailing Address 300 N AUSTIN	MO 01073 0107	County JACKSON	DMH Licensed No
OAK GROVE	MO 64075-8109	Region 3	Facility Number 16552
		Region	10002
BRISTOL MANOR OF ODESSA			
115 SOUTH 5TH ST		<b>Telephone</b> (816) 633-8692	Alzheimer's Unit No
ODESSA	MO 64076-1330	Level of Care: RCF	Bed Capacity 12
Mailing Address 115 S 5TH ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1330	Region 3	Facility Number 16547
BRISTOL MANOR OF PACIFIC 2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC	MO 63069-1165 MO 63069-1165	Telephone (636) 257-8020 Level of Care: RCF County FRANKLIN Region 6	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 20237
2049 ROSE LN PACIFIC <b>Mailing Address</b> 2049 ROSE LN		Level of Care: RCF County FRANKLIN	<b>Bed Capacity</b> 12 <b>DMH Licensed</b> No
2049 ROSE LN PACIFIC <b>Mailing Address</b> 2049 ROSE LN PACIFIC		Level of Care: RCF County FRANKLIN	<b>Bed Capacity</b> 12 <b>DMH Licensed</b> No
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC BRISTOL MANOR OF PALMYRA		Level of Care: RCF County FRANKLIN Region 6	Bed Capacity12DMH LicensedNoFacility Number20237
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN	MO 63069-1165	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA	MO 63069-1165	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN	MO 63069-1165  MO 63461-1961  MO 63461-1961	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT II 2124 HIGHRIDGE PLEASANT HILL	MO 63069-1165  MO 63461-1961  MO 63461-1961	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 20260  Alzheimer's Unit No Bed Capacity 12
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT I 2124 HIGHRIDGE PLEASANT HILL Mailing Address 2124 HIGHRIDGE	MO 63069-1165  MO 63461-1961  MO 63461-1961  HILL  MO 64080-1912	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF County CASS	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 20260  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT II 2124 HIGHRIDGE PLEASANT HILL	MO 63069-1165  MO 63461-1961  MO 63461-1961	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 20260  Alzheimer's Unit No Bed Capacity 12
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT I 2124 HIGHRIDGE PLEASANT HILL Mailing Address 2124 HIGHRIDGE PLEASANT HILL BRISTOL MANOR OF PRINCETON	MO 63069-1165  MO 63461-1961  MO 63461-1961  HILL  MO 64080-1912  MO 64080-1912	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF County CASS Region 3	Bed Capacity DMH Licensed No Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed No Facility Number  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number  12 DMH Licensed No Facility Number 16538
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT I 2124 HIGHRIDGE PLEASANT HILL Mailing Address 2124 HIGHRIDGE PLEASANT HILL BRISTOL MANOR OF PRINCETON 200 NORTH FULLERTON	MO 63069-1165  MO 63461-1961  MO 63461-1961  HILL  MO 64080-1912  MO 64080-1912	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF County CASS Region 3	Bed Capacity DMH Licensed Roo Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity 12 DMH Licensed No Facility Number  12 DMH Licensed No Facility Number  No Facility Number  No Facility Number  No
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT I 2124 HIGHRIDGE PLEASANT HILL Mailing Address 2124 HIGHRIDGE PLEASANT HILL BRISTOL MANOR OF PRINCETON 200 NORTH FULLERTON PRINCETON	MO 63069-1165  MO 63461-1961  MO 63461-1961  HILL  MO 64080-1912  MO 64080-1912	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF County CASS Region 3  Telephone (660) 748-4354 Level of Care: RCF	Bed Capacity 12 DMH Licensed No Facility Number 20237  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 20260  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 16538  Alzheimer's Unit No Facility Number 16538
2049 ROSE LN PACIFIC Mailing Address 2049 ROSE LN PACIFIC  BRISTOL MANOR OF PALMYRA 1815 SOUTH MAIN PALMYRA Mailing Address 1815 SOUTH MAIN PALMYRA  BRISTOL MANOR OF PLEASANT I 2124 HIGHRIDGE PLEASANT HILL Mailing Address 2124 HIGHRIDGE PLEASANT HILL BRISTOL MANOR OF PRINCETON 200 NORTH FULLERTON	MO 63069-1165  MO 63461-1961  MO 63461-1961  HILL  MO 64080-1912  MO 64080-1912	Level of Care: RCF County FRANKLIN Region 6  Telephone (573) 769-2127 Level of Care: RCF County MARION Region 5  Telephone (816) 987-2562 Level of Care: RCF County CASS Region 3	Bed Capacity DMH Licensed Roo Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity 12 DMH Licensed No Facility Number  12 DMH Licensed No Facility Number  No Facility Number  No Facility Number  No

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BRIGTOL MANOR OF RAVMORE			
BRISTOL MANOR OF RAYMORE 604 EAST SUNRISE DR	<b>Telephone</b> (816) 322-6782	Alzheimer's Unit	No
RAYMORE MO 64083-9037	Level of Care: RCF	Bed Capacity	12
Mailing Address 604 EAST SUNRISE DR	County CASS	DMH Licensed	No
RAYMORE MO 64083-9037	Region 3	Facility Number	19730
MITMORE INC 04003 7037	Region 5	racinty runner	17730
BRISTOL MANOR OF REPUBLIC			
634 EAST HIGHWAY 174	<b>Telephone</b> (417) 732-8998	Alzheimer's Unit	No
REPUBLIC MO 65738-1124	Level of Care: RCF	Bed Capacity	12
Mailing Address 634 EAST HWY 174	County GREENE	DMH Licensed	No
REPUBLIC MO 65738-1124	Region 1	<b>Facility Number</b>	20841
BRISTOL MANOR OF SALISBURY			
102 NORTH WILLIE ST	<b>Telephone</b> (660) 388-5728	Alzheimer's Unit	No
SALISBURY MO 65281-1458	Level of Care: RCF	Bed Capacity	12
Mailing Address 102 NORTH WILLIE ST	<b>County</b> CHARITON	DMH Licensed	No
SALISBURY MO 65281-1458	Region 5	Facility Number	18325
	S		
BRISTOL MANOR OF SEDALIA			
1208 EAST 24TH ST	<b>Telephone</b> (660) 827-2028	Alzheimer's Unit	No
SEDALIA MO 65301-8231	Level of Care: RCF	<b>Bed Capacity</b>	12
Mailing Address 1208 EAST 24TH ST	<b>County</b> PETTIS	DMH Licensed	No
SEDALIA MO 65301-8231	Region 6	Facility Number	15808
BRISTOL MANOR OF SMITHVILLE 1502 SOUTH COMMERCIAL SMITHVILLE MO 64089-8474 Mailing Address 1502 S COMMERCIAL SMITHVILLE MO 64089-8474	Telephone (816) 532-4490 Level of Care: RCF County CLAY Region 4	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 12 No 17515
BRISTOL MANOR OF STOVER			
607 WEST 4TH ST	<b>Telephone</b> (573) 377-4519	Alzheimer's Unit	No
STOVER MO 65078-0807	Level of Care: RCF	Bed Capacity	12
Mailing Address 607 WEST 4TH ST	<b>County</b> MORGAN	DMH Licensed	No
STOVER MO 65078-0807	Region 6	Facility Number	18863
BRISTOL MANOR OF TRENTON 1701 EAST 28TH ST	<b>Telephone</b> (660) 359-5599	Alzheimer's Unit	No
	Telephone (660) 359-5599 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
1701 EAST 28TH ST			
1701 EAST 28TH ST TRENTON MO 64683-1177	Level of Care: RCF	<b>Bed Capacity</b>	12
1701 EAST 28TH ST TRENTON MO 64683-1177  Mailing Address 1701 EAST 28TH ST TRENTON MO 64683-1177  BRISTOL MANOR OF UNIONVILLE	Level of Care: RCF County GRUNDY Region 4	Bed Capacity DMH Licensed Facility Number	12 No 18597
1701 EAST 28TH ST TRENTON MO 64683-1177  Mailing Address 1701 EAST 28TH ST TRENTON MO 64683-1177  BRISTOL MANOR OF UNIONVILLE 715 NORTH 22ND ST, HWY 5 NORTH	Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	12 No 18597 No
1701 EAST 28TH ST TRENTON MO 64683-1177  Mailing Address 1701 EAST 28TH ST TRENTON MO 64683-1177  BRISTOL MANOR OF UNIONVILLE 715 NORTH 22ND ST, HWY 5 NORTH UNIONVILLE MO 63565-1142	Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	12 No 18597 No 12
1701 EAST 28TH ST TRENTON MO 64683-1177  Mailing Address 1701 EAST 28TH ST TRENTON MO 64683-1177  BRISTOL MANOR OF UNIONVILLE 715 NORTH 22ND ST, HWY 5 NORTH	Level of Care: RCF County GRUNDY Region 4  Telephone (660) 947-2151	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	12 No 18597 No

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BRISTOL MANOR OF WARRENSB	URG		
603 CREACH		<b>Telephone</b> (660) 747-8319	Alzheimer's Unit No
WARRENSBURG	MO 64093-1994	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 603 CREACH		County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-1994	Region 3	Facility Number 16599
WINKENSBORG	1110 040/3 1//4	Region 5	Tacinty Number 10377
BRISTOL MANOR OF WARRENTO	ON		
815 WOOLF ROAD		<b>Telephone</b> (636) 456-1437	Alzheimer's Unit No
WARRENTON	MO 63383-6184	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 815 WOOLF RD		County WARREN	DMH Licensed No
WARRENTON	MO 63383-6184	Region 6	Facility Number 19954
BRISTOL MANOR OF WARSAW			
1600 ESTATE DR		<b>Telephone</b> (660) 438-7173	Alzheimer's Unit No
WARSAW	MO 65355-3061	Level of Care: RCF	Bed Capacity 12
Mailing Address 1600 ESTATE DR		County BENTON	DMH Licensed No
WARSAW	MO 65355-3061	Region 6	Facility Number 16343
WINDIW	1410 03333 3001	region 0	Tacinty Number 10343
BRISTOL MANOR OF WASHINGTO	ON		
100 WEST 12TH ST		<b>Telephone</b> (636) 390-0050	Alzheimer's Unit No
WASHINGTON	MO 63090-4445	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 100 WEST 12TH ST		County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4445	Region 6	Facility Number 20138
DDICTOL MANOD OF WEDD CITY			
BRISTOL MANOR OF WEBB CITY		T-l (417) 672 4221	Al-L-:
1803 NORTH MAIN, HIGHWAY D	NO 64070 1102	<b>Telephone</b> (417) 673-4231	Alzheimer's Unit No
WEBB CITY	MO 64870-1193	Level of Care: RCF	Bed Capacity 12
Mailing Address 1803 NORTH MAIN,		County JASPER	DMH Licensed No
WEBB CITY	MO 64870-1193	Region 1	Facility Number 20537
BRISTOL MANOR OF WENTZVILI	LE		
840 WEST NORTHVIEW		<b>Telephone</b> (636) 639-6777	Alzheimer's Unit No
WENTZVILLE	MO 63385-1036	Level of Care: RCF	Bed Capacity 12
Mailing Address 840 W NORTHVIEW	7	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-1036	Region 5	Facility Number 20397
BRISTOL MANOR OF WESTON			
178 WALNUT		<b>Telephone</b> (816) 386-5507	Algheimen's This
	MO (4000 1220	• '	Alzheimer's Unit No
WESTON	MO 64098-1328	Level of Care: RCF	Bed Capacity 12
Mailing Address 178 WALNUT		County PLATTE	DMH Licensed No
WESTON	MO 64098-1328	Region 4	Facility Number 16741
BRISTOL MANOR OF WILLARD			
511 WATSON		<b>Telephone</b> (417) 742-0090	Alzheimer's Unit No
WILLARD	MO 65781-8314	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 511 WATSON		County GREENE	DMH Licensed No
WILLARD	MO 65781-8314	Region 1	Facility Number 20838
		<u> </u>	•

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BROOK CHERITH ASSISTED LIVI	NG			
104 EAST ELM ST	110	<b>Telephone</b> (660) 277-4439	Alzheimer's Unit	No
HUNTSVILLE	MO 65259-1111	Level of Care: ALF	Bed Capacity	38
Mailing Address 104 EAST ELM ST	110 0323) 1111	County RANDOLPH		Yes
HUNTSVILLE	MO 65259-1111	Region 5		918
TION IS VIELE	03237 1111	Region 5	ruenty rumber	710
BROOKDALE CREVE COEUR				
ONE NEW BALLAS PLACE		<b>Telephone</b> (314) 432-5200	Alzheimer's Unit	No
CREVE COEUR	MO 63146-8700	Level of Care: ALF**	<b>Bed Capacity</b>	46
Mailing Address ONE NEW BALLAS	PLACE	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63146-8700	Region 7	Facility Number 26	178
BROOKDALE WEST COUNTY				
785 HENRY AVE		<b>Telephone</b> (636) 527-5700	Alzheimer's Unit	Yes
BALLWIN	MO 63011-2736	Level of Care: ALF**	Bed Capacity	98
Mailing Address 785 HENRY AVE	1120 02011 2720	County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63011-2736	Region 7		149
	05011 2750	Region /	Tuesday I value 20	17)
BROOKDALE WORNALL PLACE				
501 WEST 107TH ST		<b>Telephone</b> (816) 941-7777	Alzheimer's Unit	No
KANSAS CITY	MO 64114-5919	Level of Care: ALF**	Bed Capacity	68
Mailing Address 501 WEST 107TH ST	Γ	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-5919	Region 3	Facility Number 29.	304
BROOKE HAVEN HEALTHCARE				
1410 NORTH KENTUCKY AVE		<b>Telephone</b> (417) 256-7975	Alzheimer's Unit	Yes
WEST PLAINS	MO 65775-1822	Level of Care: SNF	Bed Capacity	120
Mailing Address 1410 NORTH KENT	UCKY AVE	County HOWELL	DMH Licensed	No
WEST PLAINS	MO 65775-1822	Region 1 Medicare/Medicaid	Facility Number 06.	253
BROOKHAVEN NURSING & REHA	.R			
3405 WEST MT VERNON	<del></del>	<b>Telephone</b> (417) 874-9600	Alzheimer's Unit	No
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity	90
Mailing Address 3405 WEST MT VER		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid		512
BROOKING PARK				
307 SOUTH WOODS MILL RD		Tolophono (214) 576 5545	Alzheimer's Unit	Vec
CHESTERFIELD	MO 63017-3418	Telephone (314) 576-5545 Level of Care: ALF**	Bed Capacity	Yes 93
			DMH Licensed	
Mailing Address 307 SOUTH WOODS CHESTERFIELD	MO 63017-3418	County SAINT LOUIS COUNTY  Pagin 7		No
CHESTERFIELD	1410 03017-3416	Region 7	Facility Number 14	661
BROOKING PARK				
307 SOUTH WOODS MILL RD		<b>Telephone</b> (314) 576-5545	Alzheimer's Unit	No
CHESTERFIELD		* * * * * * * * * * * * * * * * * * * *	D 10 4	97
	MO 63017-3418	Level of Care: SNF	Bed Capacity	91
Mailing Address 307 SOUTH WOODS CHESTERFIELD		County SAINT LOUIS COUNTY  Region 7 Medicare	DMH Licensed	No 661

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BROOKSIDE MANOR RESIDENTIA	AL CARE, LLC			
2434 HIGHWAY H		<b>Telephone</b> (573) 756-6434	Alzheimer's Unit	No
FARMINGTON	MO 63640-7033	Level of Care: RCF*	Bed Capacity	20
Mailing Address 2434 HIGHWAY H		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7033	Region 2	Facility Number	20034
BRUNSWICK NURSING & REHAB				
721 W HARRISON ST		<b>Telephone</b> (660) 548-3182	Alzheimer's Unit	No
BRUNSWICK	MO 65236-1096	Level of Care: SNF	Bed Capacity	60
Mailing Address 721 W HARRISON S	T	County CHARITON	DMH Licensed	No
BRUNSWICK	MO 65236-1096	Region 5 Medicare/Medicaid	Facility Number	03123
DVIETA A O DD A IDVE CENTED FOR				
BUFFALO PRAIRIE CENTER FOR 631 WEST MAIN ST	KEHAB AND HEALTHCARE	Tolonhono (417) 245 5422	Alzheimer's Unit	NO
BUFFALO	MO 65622-7496	Telephone (417) 345-5422 Level of Care: SNF		60
			Bed Capacity DMH Licensed	No
Mailing Address 631 WEST MAIN ST BUFFALO	MO 65622-7496	•	Facility Number	
BUFFALO	MO 03022-7490	Region 1 Medicare/Medicaid	racinty Number	16700
BUNGALOWS AT BRANSON MEAI	DOWS, THE			
5351 GRETNA ROAD		<b>Telephone</b> (417) 334-3336	Alzheimer's Unit	No
BRANSON	MO 65616-7298	Level of Care: RCF	Bed Capacity	104
Mailing Address 5351 GRETNA RD		County TANEY	DMH Licensed	No
BRANSON	MO 65616-7298	Region 1	Facility Number	23683
BUNGALOWS AT CHESTERFIELD	VILLAGE, THE			
2410 WEST CHESTERFIELD BLVD		<b>Telephone</b> (417) 886-4000	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-8631	Level of Care: RCF	Bed Capacity	92
Mailing Address 2410 W CHESTERFI	ELD BLVD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-8631	Region 1	Facility Number	22584
BUNGALOWS AT NEVADA, THE				
640 EAST HIGHLAND		<b>Telephone</b> (417) 667-3883	Alzheimer's Unit	No
NEVADA	MO 64772-1091	Level of Care: RCF	Bed Capacity	37
Mailing Address 640 EAST HIGHLAN	ID	County VERNON	DMH Licensed	No
NEVADA	MO 64772-1091	Region 1	Facility Number	23732
BUNGALOWS AT SPRINGFIELD E	AST THE			
3540 EAST CHEROKEE	ASI, IIIE	<b>Telephone</b> (417) 889-2222	Alzheimer's Unit	No
SPRINGFIELD	MO 65809-2828	Level of Care: RCF	Bed Capacity	67
Mailing Address 3540 EAST CHEROK		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65809-2828	Region 1	Facility Number	21025
DI MINOI ILLED	110 03007-2020	Acgion 1	racinty number	21023
<b>DVINVED DEGED</b>				
BUNKER RESIDENTIAL HOME		Tolonhono (572) (200 1202	Alabain TT 14	».T
500 CULLER AVE	MO (2(20	<b>Telephone</b> (573) 689-1392	Alzheimer's Unit	No
BUNKER Mailing Address DO DOV 276	MO 63629-	Level of Care: RCF	Bed Capacity	12 Vas
Mailing Address PO BOX 276	MO 62620 0276	County REYNOLDS	DMH Licensed	Yes
BUNKER	MO 63629-0276	Region 2	Facility Number	16882

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BUTLER CENTER FOR REHABIL	ITATION AND HEALTHCARE			
416 SOUTH HIGH ST		<b>Telephone</b> (660) 679-6158	Alzheimer's Unit	No
BUTLER	MO 64730-1827	Level of Care: SNF	Bed Capacity	98
Mailing Address 416 S HIGH ST		County BATES	DMH Licensed	No
BUTLER	MO 64730-1827	Region 3 Medicare/Medicaid	Facility Number	08627
DIVERSITE D DECIDENCIAL CA	DE CENTEED			
BUTTERFIELD RESIDENTIAL CA	ARE CENTER	T-11 (417) 226 5200	A 1-1	No
1120 NORTH BUTTERFIELD RD BOLIVAR	MO 65613-1000	Telephone (417) 326-5200 Level of Care: RCF*	Alzheimer's Unit	No 66
			Bed Capacity	No
Mailing Address 1120 N BUTTERFII BOLIVAR	MO 65613-1000		DMH Licensed	
BOLIVAR	MO 03013-1000	Region 1	Facility Number	14436
BUTTERFIELD RESIDENTIAL CA	ARE CENTER			
1120 NORTH BUTTERFIELD RD		<b>Telephone</b> (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF	Bed Capacity	24
Mailing Address 1120 N BUTTERFI	ELD RD	County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	Facility Number	14436
			·	
BUTTERFLY HAVEN				
11500 CAMPBELL ST		<b>Telephone</b> (816) 941-2836	Alzheimer's Unit	No
KANSAS CITY	MO 64131-3829	Level of Care: RCF	Bed Capacity	12
Mailing Address PO BOX 481578		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64148-1578	Region 3	Facility Number	18207
CALIFORNIA CARE CENTER				
1106 SOUTH OAK, ROUTE 3		<b>Telephone</b> (573) 796-3127	Alzheimer's Unit	No
CALIFORNIA	MO 65018-1462	Level of Care: SNF	Bed Capacity	60
Mailing Address 1106 SOUTH OAK,		County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-1462	Region 6 Medicare/Medicaid	Facility Number	10437
		region 5 Medicard Medicard		10137
CAMDENTON WINDSOR ESTATE	ES			
2042 N BUSINESS ROUTE 5		<b>Telephone</b> (573) 346-5654	Alzheimer's Unit	No
CAMDENTON	MO 65020-2611	Level of Care: SNF	Bed Capacity	82
Mailing Address 2042 N BUSINESS I	ROUTE 5	County CAMDEN	DMH Licensed	No
CAMDENTON	MO 65020-2611	Region 6 Medicare/Medicaid	Facility Number	08688
CAMELOT NURSING AND REHAI	BILITATION CENTER			
705 GRAND CANYON DRIVE	BILITATION CENTER	<b>Telephone</b> (573) 756-8911	Alzheimer's Unit	NO
FARMINGTON	MO 63640-2161	Level of Care: SNF	Bed Capacity	97
Mailing Address 705 GRAND CANY		County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-2161	Region 2 Medicare/Medicaid	Facility Number	00978
11111111101011		Acgion 2 Medicare/Medicald	racincy ramber	00270
CAMERON NURSING CENTER				
801 EUCLID AVE		<b>Telephone</b> (816) 632-7254	Alzheimer's Unit	No
CAMERON	MO 64429-2003	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address PO BOX 438		County CLINTON	DMH Licensed	No
CAMERON	MO 64429-0438	Region 4 Medicare/Medicaid	Facility Number	00983

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GIPP IN PROV			
CAPE ALBEON	T-l ((24) 941 2200	A 1-1	37
3300 LAKE BEND DR	Telephone (636) 861-3200	Alzheimer's Unit	Yes
VALLEY PARK MO 63088-2524	Level of Care: ALF**	Bed Capacity	100
Mailing Address 3300 LAKE BEND DR	County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK MO 63088-2524	Region 7	Facility Number	22838
CAPETOWN ASSISTED LIVING			
2857 CAPE LACROIX RD	<b>Telephone</b> (573) 334-4855	Alzheimer's Unit	Yes
CAPE GIRARDEAU MO 63701-8588	Level of Care: ALF**	Bed Capacity	48
Mailing Address 2857 CAPE LACROIX RD	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63701-8588	Region 2	Facility Number	23989
CAREGIVERS INN			
1297 FEISE RD	<b>Telephone</b> (636) 240-7979	Alzheimer's Unit	Yes
DARDENNE PRAIRIE MO 63368-6710	Level of Care: ALF**	Bed Capacity	30
Mailing Address 1297 FEISE RD	County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE MO 63368-6710	Region 5	Facility Number	15342
CARL JUNCTION RESIDENTIAL CARE			
201 FIR RD	<b>Telephone</b> (417) 782-5659	Alzheimer's Unit	No
CARL JUNCTION MO 64834-9222	Level of Care: RCF*	Bed Capacity	37
Mailing Address 201 FIR RD	County JASPER	DMH Licensed	No
CARL JUNCTION MO 64834-9222	Region 1	Facility Number	20550
CADMEL HILL CHIELL NECC & DEHABILITATION			
CARMEL HILLS WELLNESS & REHABILITATION 810 EAST WALNUT ST	Tolophone (216) 461 0600	Alzheimer's Unit	Voc
INDEPENDENCE MO 64050-4025	Telephone (816) 461-9600 Level of Care: SNF	Bed Capacity	Yes 194
Mailing Address 810 EAST WALNUT ST	County JACKSON	DMH Licensed	No
INDEPENDENCE MO 64050-4025	Region 3 Medicare/Medicaid	Facility Number	23422
INDELENDENCE MIO 04030-4023	Region 5 Medicare/Medicaid	racinty Number	23422
CARNEGIE VILLAGE ASSISTED LIVING FACILITY			
103 BERNARD DR	<b>Telephone</b> (816) 322-0844	Alzheimer's Unit	No
BELTON MO 64012-6182	Level of Care: ALF**	Bed Capacity	85
Mailing Address 103 BERNARD DR	County CASS	DMH Licensed	No
BELTON MO 64012-6182	Region 3	Facility Number	25482
	Region		20.02
CARNEGIE VILLAGE REHABILITATION & HEALTH CARE CENTER	R, LLC		
105 BERNARD DRIVE	<b>Telephone</b> (816) 348-8815	Alzheimer's Unit	No
BELTON MO 64012-6181	Level of Care: SNF	Bed Capacity	78
Mailing Address 105 BERNARD DRIVE	County CASS	DMH Licensed	No
BELTON MO 64012-6181	Region 3 Medicare/Medicaid	Facility Number	30531
	<u> </u>	-	
CARONDELET RETIREMENT MANOR			
6811 MICHIGAN		Alzheimer's Unit	No
	<b>Telephone</b> (314) 353-9552	Alzhemer s cint	
SAINT LOUIS MO 63111-2834	Telephone (314) 353-9552 Level of Care: RCF*	Bed Capacity	33
SAINT LOUIS MO 63111-2834  Mailing Address PO BOX 37073			33 Yes
	Level of Care: RCF*	<b>Bed Capacity</b>	

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CARRIAGE RESIDENTIAL CARE CE	ENTER LLC			
508 NORTH WASHINGTON ST		<b>Telephone</b> (573) 756-8140	Alzheimer's Unit	No
	MO 63640-1756	Level of Care: RCF*	Bed Capacity	20
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0675	Region 2	Facility Number	07824
CARRIAGE COUARE REHAR AND IN	EALTHCADE CENTED			
CARRIAGE SQUARE REHAB AND HI 4009 GENE FIELD RD	EALTHCARE CENTER	<b>Telephone</b> (816) 364-1526	Alzheimer's Unit	No
	MO 64506-1864	Telephone (816) 364-1526 Level of Care: SNF		130
Mailing Address 4009 GENE FIELD RD	WIO 04300-1804	County BUCHANAN	Bed Capacity DMH Licensed	No
S .	MO 64506-1864		Facility Number	01061
SAIRT JOSEFFF	WIO 04300-1804	Region 4 Medicare/Medicaid	racinty Number	01001
CARRIAGE SQUARE REHAB AND HI	EALTHCARE CENTER			
4009 GENE FIELD RD		<b>Telephone</b> (816) 364-1526	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-1864	Level of Care: RCF*	Bed Capacity	32
Mailing Address 4009 GENE FIELD RD		County BUCHANAN	DMH Licensed	No
_	MO 64506-1864	Region 4	Facility Number	01061
		8	·	
CARRIE DUMAS LONG TERM CARE	E FACILITY			
2836 BENTON BLVD		<b>Telephone</b> (816) 924-5017	Alzheimer's Unit	No
KANSAS CITY	MO 64128-1140	Level of Care: ALF	Bed Capacity	34
Mailing Address 2836 BENTON BLVD		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64128-1140	Region 3	Facility Number	18550
CARRIE ELLIGSON GIETNER HOMI	F.			
5000 SOUTH BROADWAY	E	<b>Telephone</b> (314) 752-0000	Alzheimer's Unit	No
	MO 63111-2015	Level of Care: SNF	Bed Capacity	130
Mailing Address 5000 S BROADWAY	110 03111 2013	County SAINT LOUIS CITY	DMH Licensed	No
	MO 63111-2015	Region 7 Medicare/Medicaid	Facility Number	02877
SAIRVI EOOB	NIO 03111 2013	Region / Medical e/Medicalu	racinty runner	02877
CARROLL HOUSE				
307 GRAND		<b>Telephone</b> (660) 542-1599	Alzheimer's Unit	No
CARROLLTON	MO 64633-2265	Level of Care: SNF	Bed Capacity	63
Mailing Address 307 GRAND		County CARROLL	DMH Licensed	No
CARROLLTON	MO 64633-2265	Region 4 Medicare/Medicaid	Facility Number	22027
CADTUACE HEALTH AND DEHADI	I ITATION CENTED			
CARTHAGE HEALTH AND REHABII	LITATION CENTER	T-1 (417) 259 1207	A 1-1	Vac
1901 BUENA VISTA AVE CARTHAGE	MO 64836-3178	Telephone (417) 358-1397 Level of Care: SNF	Alzheimer's Unit	Yes 120
			Bed Capacity	
Mailing Address 1901 BUENA VISTA A		County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3178	Region 1 Medicare/Medicaid	Facility Number	12472
CASSVILLE HEALTH CENTER FOR	REHAB AND HEALTHCARE			
1300 COUNTY FARM RD		<b>Telephone</b> (417) 847-3386	Alzheimer's Unit	No
CASSVILLE	MO 65625-1726	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 1300 COUNTY FARM	RD	County BARRY	DMH Licensed	No
CASSVILLE	MO 65625-1726	Region 1 Medicare/Medicaid	Facility Number	01097

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CASTLEWOOD SENIOR LIVING THE	Ε		
1538 N OLD CASTLE ROAD		<b>Telephone</b> (417) 724-8188	Alzheimer's Unit Yes
NIXA	MO 65714-9902	Level of Care: ALF**	<b>Bed Capacity</b> 66
Mailing Address 1538 N OLD CASTLE R	ROAD	County CHRISTIAN	<b>DMH Licensed</b> No
NIXA	MO 65714-9902	Region 1	Facility Number 30722
CEDAR KNOLL PARTNERSHIP			
13635 STATE ROUTE V		<b>Telephone</b> (573) 265-3658	Alzheimer's Unit No
SAINT JAMES	MO 65559-8331	Level of Care: ALF	<b>Bed Capacity</b> 32
Mailing Address 13635 STATE ROUTE V	V	County PHELPS	DMH Licensed Yes
•	MO 65559-8331	Region 6	Facility Number 01142
			•
CEDAR POINTE			
1800 WHITE COLUMNS DR		<b>Telephone</b> (573) 364-7766	Alzheimer's Unit Yes
	MO 65401-2044	Level of Care: SNF	Bed Capacity 102
Mailing Address 1800 WHITE COLUMN		County PHELPS	DMH Licensed No
· ·		·	
ROLLA	MO 65401-2044	Region 6 Medicare/Medicaid	Facility Number 06801
CEDAR RIDGE CARE CENTER, LLC			
71 SYCAMORE		<b>Telephone</b> (417) 847-5546	Alzheimer's Unit No
	MO 65625-1755		
	WIO 03023-1733		
Mailing Address PO BOX 633		County BARRY	DMH Licensed Yes
CASSVILLE N	MO 65625-0633	Region 1	Facility Number 15295
CEDAR VALLEY BOARDING HOME			
286 HIGHWAY VV		<b>Telephone</b> (573) 686-4877	Alzheimer's Unit No
	MO 63932-9174	Level of Care: RCF	Bed Capacity 10
Mailing Address 286 HIGHWAY VV		County BUTLER	DMH Licensed Yes
	MO 63932-9174	Region 2	Facility Number 08923
DROSELLI	WIO 03/32-7174	Region 2	racinty Number 08923
CEDARCREST MANOR		TEMPORARY CLOS	SURE - STAFFING
324 WEST 5TH ST		<b>Telephone</b> (636) 239-7848	Alzheimer's Unit Yes
	MO 63090-2306	Level of Care: SNF	Bed Capacity 177
Mailing Address 324 WEST 5TH ST	2500	County FRANKLIN	DMH Licensed No
	MO 63090-2306	Region 6 Medicare/Medicaid	Facility Number 01160
WINDIM COLO		Region o Medicare/Medicard	Tuellieg Pulliser 01100
CEDARGATE HEALTHCARE			
2350 KANELL BLVD		<b>Telephone</b> (573) 785-0188	Alzheimer's Unit No
	MO 63901-4036	Level of Care: SNF	Bed Capacity 108
Mailing Address 2350 KANELL BLVD		County BUTLER	DMH Licensed No
· ·	MO 63901-4036	Region 2 Medicare/Medicaid	Facility Number 01182
I OI LAN DLUIT	WIO 03701-4030	region 2 Medicare/Medicald	Facility Number 01182
CEDARGATE HEALTHCARE			
2350 KANELL BLVD		<b>Telephone</b> (573) 785-0188	Alzheimer's Unit No
	MO 63901-4036	Level of Care: ALF	<b>Bed Capacity</b> 16
3.5 MI			
Mailing Address 2350 KANELL BLVD		County BUTLER	DMH Licensed No
Mailing Address 2350 KANELL BLVD POPLAR BLUFF	MO 63901-4036		

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CEDARHURST OF ARNOLD			
2069 MISSOURI STATE ROAD	<b>Telephone</b> (636) 333-2715	Alzheimer's Unit	Yes
ARNOLD MO 63010-4809	Level of Care: ALF**	Bed Capacity	84
Mailing Address 2069 MISSOURI STATE ROAD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4809	Region 2	Facility Number	32428
CEDARHURST OF BLUE SPRINGS			
20551 E TRINITY PLACE	<b>Telephone</b> (816) 685-8863	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-9501	Level of Care: ALF**	Bed Capacity	89
Mailing Address 20551 E TRINITY PLACE	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-9501	Region 3	Facility Number	31581
	_		
CEDARHURST OF COLUMBIA			
2333 CHAPEL HILL RD	<b>Telephone</b> (573) 234-1091	Alzheimer's Unit	Yes
COLUMBIA MO 65203-1537	Level of Care: ALF**	Bed Capacity	127
Mailing Address 2333 CHAPEL HILL RD	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-1537	Region 6	Facility Number	29874
G0200 1037	Kegion 0	Tuelley Tulliser	27074
CED A DIMIDOT OF DEC PERSON			
CEDARHURST OF DES PERES 12826 DAYLIGHT CIRCLE	T-1 (214) 016 6614	A1_1	v
	<b>Telephone</b> (314) 916-6614	Alzheimer's Unit	Yes
SAINT LOUIS MO 63131-1890	Level of Care: ALF**	Bed Capacity	76
Mailing Address 12826 DAYLIGHT CIRCLE	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63131-1890	Region 7	Facility Number	30351
CEDARHURST OF FARMINGTON			
200 MAPLE VALLEY DRIVE	<b>Telephone</b> (573) 713-9150	Alzheimer's Unit	Yes
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331	Level of Care: ALF**	<b>Bed Capacity</b>	84
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331 Mailing Address 200 MAPLE VALLEY DRIVE	Level of Care: ALF** County SAINT FRANCOIS	Bed Capacity DMH Licensed	84 No
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331	Level of Care: ALF**	<b>Bed Capacity</b>	84
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331	Level of Care: ALF** County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed	84 No
200 MAPLE VALLEY DRIVE  FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE  FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA	Level of Care: ALF** County SAINT FRANCOIS Region 2	Bed Capacity DMH Licensed Facility Number	84 No 32159
200 MAPLE VALLEY DRIVE  FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE  FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET	Level of Care: ALF** County SAINT FRANCOIS Region 2  ARE Telephone (417) 815-0122	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	84 No 32159 Yes
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	84 No 32159 Yes 90
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	84 No 32159 Yes 90 No
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	84 No 32159 Yes 90
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	84 No 32159 Yes 90 No
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	84 No 32159 Yes 90 No 31890
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST  SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	84 No 32159 Yes 90 No 31890 Yes 66 No
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	84 No 32159 Yes 90 No 31890
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	84 No 32159 Yes 90 No 31890 Yes 66 No
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890 Yes 66 No 28295
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890 Yes 66 No 28295
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY 1800 FIRST CAPITOL DRIVE SAINT CHARLES MO 63301-1646	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890 Yes 66 No 28295
200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  Mailing Address 200 MAPLE VALLEY DRIVE FARMINGTON MO 63640-7331  CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY CA 842 LYNN STREET LEBANON MO 65536-3832  Mailing Address 842 LYNN STREET LEBANON MO 65536-3832  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614  Mailing Address 1146 E LAKEWOOD ST SPRINGFIELD MO 65810-2614  CEDARHURST OF ST. CHARLES ASSISTED LIVING & MEMORY 1800 FIRST CAPITOL DRIVE	Level of Care: ALF** County SAINT FRANCOIS Region 2  Telephone (417) 815-0122 Level of Care: ALF** County LACLEDE Region 1  Telephone (417) 885-9050 Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	84 No 32159 Yes 90 No 31890 Yes 66 No 28295

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	a a				
CEDARHURST OF TESSON HEIGHT	S	m., ,	(214) 040 1266		
12335 WEST BEND DR	MO (2120 2170	Telephone	(314) 849-1366	Alzheimer's Unit	No
	MO 63128-2160	Level of Care:	ALF**	Bed Capacity	79 N
Mailing Address 12335 WEST BEND DI		·	INT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-2160	Region 7		Facility Number	13663
CEDARHURST OF WEST PLAINS					
1521 US HIGHWAY 63		Tolonhono	(417) 372-8940	Alzheimer's Unit	YES
	MO 65775-9809	Telephone Level of Care:	ALF**		84
			WELL	Bed Capacity DMH Licensed	No
Mailing Address 1521 US HIGHWAY 63 WEST PLAINS	MO 65775-9809	0 0 00000	WELL		
WEST PLAINS	MO 65775-9809	Region 1		Facility Number	32028
CEDARS OF LIBERTY HEALTH CAR	RE CENTER				
200 WEST RUTH EWING RD		Telephone	(816) 781-7600	Alzheimer's Unit	No
	MO 64068-9496	Level of Care:	RCF	Bed Capacity	206
Mailing Address 200 WEST RUTH EWI		County CL		DMH Licensed	Yes
· ·	MO 64068-9496	Region 4		Facility Number	13854
	110 01000 7170	Region .		Tuesting Tuesting	13034
CENTRAL GARDENS INC					
302 NORTH ELM ST		Telephone	(573) 624-0011	Alzheimer's Unit	No
DEXTER	MO 63841-1773	Level of Care:	RCF*	<b>Bed Capacity</b>	83
Mailing Address 302 NORTH ELM ST		County STO	ODDARD	DMH Licensed	No
DEXTER	MO 63841-1773	Region 2		Facility Number	18858
CENTRAL RESIDENCE, THE			(211) 255 5522		
5143 WATERMAN BLVD		Telephone	(314) 367-5620	Alzheimer's Unit	No
	MO 63108-1103	Level of Care:	RCF*	Bed Capacity	41
Mailing Address 5143 WATERMAN BL			INT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-1103	Region 7		Facility Number	02785
CENTURY PINES ASSISTED LIVING					
709 EAST MCCRACKEN RD		Telephone	(417) 581-7278	Alzheimer's Unit	No
OZARK	MO 65721-9499	Level of Care:	ALF	Bed Capacity	58
Mailing Address 709 EAST MCCRACK	EN RD	County CH	RISTIAN	DMH Licensed	Yes
	MO 65721-9499	Region 1		Facility Number	01200
CENTURY PINES ASSISTED LIVING					
709 EAST MCCRACKEN RD		Telephone	(417) 581-7278	Alzheimer's Unit	No
OZARK	MO 65721-9499	Level of Care:	ALF**	Bed Capacity	18
Mailing Address 709 EAST MCCRACK	EN RD	County CH	RISTIAN	DMH Licensed	No
OZARK	MO 65721-9499	Region 1		Facility Number	01200
av. 1					
CHAFFEE NURSING CENTER		m. 1	(572) 007 25: -		
12273 STATE HIGHWAY 77	NO (2510 0212	Telephone	(573) 887-3615	Alzheimer's Unit	No
	MO 63740-8219	Level of Care:	SNF	Bed Capacity	71 N
Mailing Address 12273 STATE HIGHWA		·	OTT	DMH Licensed	No
CHAFFEE	MO 63740-8219	Region 2	Medicare/Medicaid	Facility Number	13652

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CHARITON PARK HEALTH CARE	E CENTER			
902 MANOR DR		<b>Telephone</b> (660) 388-6486	Alzheimer's Unit	No
SALISBURY	MO 65281-1236	Level of Care: SNF	Bed Capacity	120
Mailing Address 902 MANOR DR		County CHARITON	DMH Licensed	No
SALISBURY	MO 65281-1236	Region 5 Medicare/Medicaid	Facility Number	06469
CHADI ESTON MANOD				
CHARLESTON MANOR 1220 EAST MARSHALL		<b>Telephone</b> (573) 683-3721	Alzheimer's Unit	Yes
CHARLESTON	MO 63834-1349	Level of Care: SNF	Bed Capacity	120
Mailing Address 1220 EAST MARSH			DMH Licensed	No
CHARLESTON	MO 63834-1349			
CHARLESTON	WO 03834-1349	Region 2 Medicare/Medicaid	Facility Number	01251
CHATEAU ANN MARIE				
7700 MINNESOTA AVE		<b>Telephone</b> (314) 449-1497	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-3336	Level of Care: ALF	Bed Capacity	22
Mailing Address 7700 MINNESOTA	AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63111-3336	Region 7	Facility Number	14711
CHATEAU GIRARDEAU				
3120 INDEPENDENCE ST		<b>Telephone</b> (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5043	Level of Care: ALF**	Bed Capacity	55
Mailing Address 3120 INDEPENDEN		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5043	Region 2	Facility Number	01386
	1.10 03 / 03 20 10	Region 2	Tuelley Tulliser	01300
CHATEAU GIRARDEAU				
3120 INDEPENDENCE ST		<b>Telephone</b> (573) 335-1281	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5043	Level of Care: SNF	Bed Capacity	75
Mailing Address 3120 INDEPENDEN		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5043	Region 2 Medicare/Medicaid	Facility Number	01386
CHEROKEE RESIDENTIAL CARE	ACQUISITION, LLC			
3409 MISSOURI AVE		<b>Telephone</b> (314) 771-8360	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-3236	Level of Care: RCF*	Bed Capacity	30
Mailing Address 3409 MISSOURI AV	Æ	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63118-3236	Region 7	Facility Number	14047
CHIEGER DEVEL DAVIA A G				
CHESTERFIELD VILLAS		m. 1 (626) 522 0206		N
14901 N OUTER 40 RD	MO (2017 (024	<b>Telephone</b> (636) 532-9296	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-6034	Level of Care: ALF	Bed Capacity	57
Mailing Address 14901 N OUTER 40		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-6034	Region 7	Facility Number	29067
CHESTNUT GLENN - ASSISTED L	IVING BY AMERICARE			
121 KLONDIKE CROSSING		<b>Telephone</b> (636) 928-4200	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-5394	Level of Care: ALF**	<b>Bed Capacity</b>	74
Mailing Address 121 KLONDIKE CR	OSSING	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-5394	Region 5	Facility Number	25446

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CHESTNUT REHAB AND NURSING					
10954 KENNERLY RD	Tele	ephone	(314) 843-4242	Alzheimer's Unit	No
SAINT LOUIS MO 63:	128-2018 Lev	vel of Care:	SNF	Bed Capacity	167
Mailing Address 10954 KENNERLY RD		unty SAIN	NT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63	128-2018 Reg	gion 7 M	ledicare/Medicaid	Facility Number	03182
CHRISTIAN EXTENDED CARE & REHABIL	ITATION				
11160 VILLAGE NORTH DR		ephone	(314) 355-8010	Alzheimer's Unit	No
		vel of Care:	SNF	Bed Capacity	60
Mailing Address 11160 VILLAGE NORTH DR	201		NT LOUIS COUNTY	DMH Licensed	No
9			ledicare/Medicaid	Facility Number	08300
CHURCHILL TERRACE - ASSISTED LIVING	BY AMERICARE				
120 HOSPITAL DR		ephone	(573) 642-5222	Alzheimer's Unit	No
		vel of Care:	ALF**	<b>Bed Capacity</b>	57
Mailing Address 120 HOSPITAL DR			LAWAY	DMH Licensed	No
		gion 6		Facility Number	20783
CITIZENS MEMORIAL HEALTH CARE FAC	CILITY				
1218 W LOCUST ST	Tele	ephone	(417) 326-7648	Alzheimer's Unit	No
BOLIVAR MO 656	613-1312 <b>Lev</b>	vel of Care:	SNF	<b>Bed Capacity</b>	111
Mailing Address PO BOX 590	Cou	unty POL	K	DMH Licensed	No
BOLIVAR MO 656	613-0590 <b>Reg</b>	gion 1 M	ledicare/Medicaid	Facility Number	00710
CLADA MANOD MUDGING HOME					
CLARA MANOR NURSING HOME	Tol	onhono	(916) 756 1502	Alabaiman'a Unit	No
3621 WARWICK BLVD		ephone vel of Care:	(816) 756-1593 SNF	Alzheimer's Unit	No 90
			KSON	Bed Capacity DMH Licensed	No
Mailing Address 3621 WARWICK BLVD		•			
KANSAS CITY MO 64	111-1403 <b>Reg</b>	gion 3 M	<b>Iedicaid</b>	Facility Number	14102
CLARENCE CARE CENTER					
111 EAST ST		ephone	(660) 699-2118	Alzheimer's Unit	No
		vel of Care:	SNF	Bed Capacity	60
Mailing Address 111 EAST ST		unty SHE	LBY	DMH Licensed	No
CLARENCE MO 634	437-1902 <b>Reg</b>	gion 5 M	ledicare/Medicaid	Facility Number	01475
CLARENDALE CLAYTON					
7651 CLAYTON ROAD	Tele	ephone	(314) 390-9399	Alzheimer's Unit	Yes
CLAYTON MO 633		vel of Care:	ALF**	<b>Bed Capacity</b>	98
Mailing Address 7651 CLAYTON ROAD			NT LOUIS COUNTY	DMH Licensed	No
	317-1419 <b>Reg</b>	gion 7		Facility Number	32528
CLARENDALE OF ST PETERS 10 DUBRAY DRIVE	Tal	ephone	(636)706 5100	Alzheimer's Unit	¥/OC
		epnone vel of Care:	(636)706-5100 ALF**	Bed Capacity	yes 110
Mailing Address 10 DUBRAY DRIVE			ALF*** NT CHARLES	DMH Licensed	No
		•	VI CHARLES		
SAUNT PETERS MU 03.	376-3558 <b>Reg</b>	gion 5		Facility Number	32095

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CV A DV CA DV CVDVIII ON ON				
CLARK CARE CENTER - ONE		Tolonhous (417) 667 2000	Alzheimer's Unit	No
1505 EAST ASHLAND ST NEVADA	MO 64772-4025	Telephone (417) 667-3900 Level of Care: RCF*	Bed Capacity	No 38
Mailing Address PO BOX 246	1410 04772-4023	County VERNON	DMH Licensed	Yes
NEVADA	MO 64772-0246	Region 1	Facility Number	20206
NEVADA	1410 04772-0240	Kegion 1	Pacinty Number	20200
CLARK COUNTY NURSING HOME				
1260 N JOHNSON ST		<b>Telephone</b> (660) 727-3303	Alzheimer's Unit	No
KAHOKA	MO 63445-1100	Level of Care: SNF	Bed Capacity	103
Mailing Address 1260 N JOHNSON ST	Γ	County CLARK	DMH Licensed	No
KAHOKA	MO 63445-1100	Region 5 Medicare/Medicaid	Facility Number	01480
CLARK COUNTY NURSING HOME 1260 N JOHNSON ST		Tolonhous (660) 727 2202	Alahaiman'a Tinit	No
KAHOKA	MO 63445-1100	Telephone (660) 727-3303 Level of Care: RCF*	Alzheimer's Unit Bed Capacity	No 22
Mailing Address 1260 N JOHNSON ST		County CLARK	DMH Licensed	No
KAHOKA	MO 63445-1100	Region 5	Facility Number	01480
KAHOKA	WO 03443-1100	Kegion 5	racinty Number	01480
CLARK'S MOUNTAIN NURSING C	ENTER			
2100 BARNES		<b>Telephone</b> (573) 223-4297	Alzheimer's Unit	No
PIEDMONT	MO 63957-1008	Level of Care: SNF	<b>Bed Capacity</b>	91
Mailing Address 2100 BARNES		County WAYNE	DMH Licensed	No
PIEDMONT	MO 63957-1008	Region 2 Medicare/Medicaid	Facility Number	01496
CLARU DEVILLE NURSING CENT	ED			
105 SPRUCE ST	EK	<b>Telephone</b> (573) 783-3993	Alzheimer's Unit	Yes
FREDERICKTOWN	MO 63645-1002	Level of Care: SNF	Bed Capacity	90
Mailing Address 105 SPRUCE ST	1120 000.0 1002	County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-1002	Region 2 Medicare/Medicaid	Facility Number	17527
CLEARVIEW NURSING CENTER				
430 SALCEDO ROAD		<b>Telephone</b> (573) 471-2565	Alzheimer's Unit	No
SIKESTON	MO 63801-4802	Level of Care: SNF	Bed Capacity	98
Mailing Address PO BOX 707	1.0 .0004.0505	County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-0707	Region 2 Medicare/Medicaid	Facility Number	19913
CLINTON HEALTHCARE AND REI	HABILITATION CENTER			
1009 EAST OHIO		<b>Telephone</b> (660) 885-5571	Alzheimer's Unit	No
CLINTON	MO 64735-2455	Level of Care: SNF	Bed Capacity	120
Mailing Address 1009 EAST OHIO		County HENRY	DMH Licensed	No
CLINTON	MO 64735-2455	Region 1 Medicare/Medicaid	Facility Number	01318
COATES STREET COMFORT HOU	SE			
612 WEST COATES ST	<del></del>	<b>Telephone</b> (660) 263-6759	Alzheimer's Unit	No
MOBERLY	MO 65270-1319	Level of Care: RCF	Bed Capacity	20
Mailing Address PO BOX 781		County RANDOLPH	DMH Licensed	Yes
			T	

**Facility Number** 

08220

MO 65270-0781

MOBERLY

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COLLIER CARE HOME, INC				
3001 NW VESPER ST		<b>Telephone</b> (816) 225-9317	Alzheimer's Unit	No
BLUE SPRINGS	MO 64015-3104	Level of Care: RCF*	Bed Capacity	15
Mailing Address 3001 NW VESPER S		County JACKSON	DMH Licensed	Yes
BLUE SPRINGS	MO 64015-3104	Region 3	Facility Number	01591
COLONIAL HOME, THE				
102 SUMMIT ST		<b>Telephone</b> (573) 996-4283	Alzheimer's Unit	No
DONIPHAN	MO 63935-1328	Level of Care: ALF**	Bed Capacity	31
Mailing Address 102 SUMMIT ST		County RIPLEY	DMH Licensed	No
DONIPHAN	MO 63935-1328	Region 2	Facility Number	01610
COLONIAL HOUSE OF FESTUS II		T-l-nh (626) 465 0004	A 1-1	NI.
129 GRAY ST	MO 62020 1050	<b>Telephone</b> (636) 465-0994	Alzheimer's Unit	No
FESTUS	MO 63028-1950	Level of Care: RCF	Bed Capacity	20 N-
Mailing Address 129 GRAY ST	MO 62020 1050	County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-1950	Region 2	Facility Number	07322
COLONIAL MANOR, LLC				
907 WEST MALONE ST		<b>Telephone</b> (573) 471-5541	Alzheimer's Unit	No
SIKESTON	MO 63801-2425	Level of Care: ALF	Bed Capacity	20
Mailing Address 907 WEST MALONE		County SCOTT	DMH Licensed	Yes
SIKESTON	MO 63801-2425	Region 2		13255
Sittle	NO 03001 2 123	Region 2	racinty raniber	13233
COLONIAL RESIDENTIAL CARE I	FACILITY II			
1162 CEDAR ST		<b>Telephone</b> (573) 734-2846	Alzheimer's Unit	No
BISMARCK	MO 63624-8920	Level of Care: RCF*	Bed Capacity	48
Mailing Address PO BOX 134		County SAINT FRANCOIS	DMH Licensed	Yes
MOUNTAIN GROVE	MO 65711-0134	Region 2	Facility Number	01693
COLONIAL SPRINGS HEALTHCAI	RE CENTER			
750 W COOPER ST		<b>Telephone</b> (417) 345-2228	Alzheimer's Unit	Yes
BUFFALO	MO 65622-8662	Level of Care: SNF	Bed Capacity	134
Mailing Address PO BOX 978		County DALLAS	DMH Licensed	No
BUFFALO	MO 65622-0978	Region 1 Medicare/Medicaid	Facility Number	01302
COLONY POINTE-ASSISTED LIVE	NG BY AMERICARE			
1510 CHAPEL HILL RD		<b>Telephone</b> (573) 234-1193	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-5457	Level of Care: ALF**	Bed Capacity	59
Mailing Address 1510 CHAPEL HILL		County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-5457	Region 6		28191
COLONIDAT	00200 0 10 /	Augion V	Tuesday Trustion	20171
COLUMBIA MANOR CARE CENTI	ER			
2012 NIFONG BLVD		<b>Telephone</b> (573) 449-1246	Alzheimer's Unit	No
COLUMBIA	MO 65201-3874	Level of Care: SNF	Bed Capacity	52
Mailing Address 2012 NIFONG BLVD	)	County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-3874	Region 6 Medicare/Medicaid	Facility Number	01715

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COLUMBIA POST ACUTE				
3535 BERRYWOOD DRIVE		<b>Telephone</b> (573) 397-7144	Alzheimer's Unit	No
COLUMBIA	MO 65201-6584	Level of Care: SNF	Bed Capacity	70
Mailing Address 3535 BERRYWOOD I		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-6584	Region 6 Medicare/Medicaid		30959
COLUMBIA	WIO 05201-0504	Region • Medicare/Medicaid	racinty Number	00939
COLUMBIA STREET RESIDENTIAL	. CARE CENTER LLC			
208 WEST COLUMBIA ST		<b>Telephone</b> (573) 756-7481	Alzheimer's Unit	No
FARMINGTON	MO 63640-1705	Level of Care: RCF	Bed Capacity	16
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0675	Region 2	Facility Number	)1729
COMMUNITIES OF WILDWOOD RA	ANCH			
3222 SOUTH JOHN DUFFY DR	aven	<b>Telephone</b> (417) 621-0175	Alzheimer's Unit	No
JOPLIN	MO 64804-1569	Level of Care: SNF	Bed Capacity	120
Mailing Address 3222 SOUTH JOHN D		County JASPER	DMH Licensed	No
JOPLIN	MO 64804-1569	·		
JOPLIN	WO 04804-1309	Region 1 Medicare/Medicaid	racinty Number 2	29077
COMMUNITY CARE CENTER OF L	EMAY, INC			
9353 SOUTH BROADWAY		<b>Telephone</b> (314) 631-0540	Alzheimer's Unit	No
SAINT LOUIS	MO 63125-1600	Level of Care: SNF	Bed Capacity	60
Mailing Address 9353 SOUTH BROAD	WAY	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63125-1600	Region 7 Medicare/Medicaid	Facility Number 0	)1732
COMMUNITY MANOR				
783 WEBER ROAD		<b>Telephone</b> (573) 756-8998	Alzheimer's Unit	No
FARMINGTON	MO 63640-3318	Level of Care: SNF	Bed Capacity	99
Mailing Address 783 WEBER RD	WO 03040-3318	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-3318	Region 2 Medicare/Medicaid		13887
PARIMINOTON	WIO 03040-3316	Region 2 Medicare/Medicaid	racinty Number	13007
COMMUNITY OF AUTUMN COURT	AT MT VERNON, THE			
1421 S LANDRUM ST		<b>Telephone</b> (417) 466-3549	Alzheimer's Unit	No
MOUNT VERNON	MO 65712-1912	Level of Care: ALF**	<b>Bed Capacity</b>	34
Mailing Address 1421 S LANDRUM ST	Γ	County LAWRENCE	DMH Licensed	No
MOUNT VERNON	MO 65712-1912	Region 1	Facility Number 2	20809
COMMUNITY SPRINGS HEALTHCA	ARE FACILITY			
400 EAST HOSPITAL RD	TACILII I	<b>Telephone</b> (417) 876-2531	Alzheimer's Unit	Yes
EL DORADO SPRINGS	MO 64744-2024	Level of Care: SNF	Bed Capacity	120
Mailing Address 400 EAST HOSPITAL		County CEDAR	DMH Licensed	No
EL DORADO SPRINGS	MO 64744-2024	Region 1 Medicare/Medicaid		)1740
TT DOUVING SI VIIAOS	1110 UT/TT-2U2T	region i wieuicare/wiedicaid	racinty Number	71 /4U
CONVERSE HOME				
17025 OLD JAMESTOWN RD		<b>Telephone</b> (314) 355-8041	Alzheimer's Unit	No
FLORISSANT	MO 63034-1414	Level of Care: RCF	Bed Capacity	12
Mailing Address 17025 OLD JAMESTO	OWN RD	County SAINT LOUIS COUNTY	DMH Licensed	Yes
FLORISSANT	MO 63034-1414	Region 7	Facility Number 0	)1777

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COOPED HOUSE				
COOPER HOUSE 4385 MARYLAND AVE		<b>Telephone</b> (314) 535-1919	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2703	Level of Care: RCF*	Bed Capacity	36
Mailing Address 4385 MARYLAND A		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2703	Region 7	Facility Number	21439
SAINI LOUIS	WIO 03108-2703	Region /	Facility Number	21439
COPPER ROCK HEALTHCARE				
712 COPPER ROCK DRIVE		<b>Telephone</b> (417) 202-4606	Alzheimer's Unit	No
ROGERSVILLE	MO 65742-8970	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 560		County WEBSTER	DMH Licensed	No
ROGERSVILLE	MO 65742-8970	Region 1 Medicare/Medicaid	Facility Number	31851
CORI MANOR HEALTHCARE & RI	EHABILITATION CENTER			
560 CORISANDE HILLS RD		<b>Telephone</b> (636) 343-2282	Alzheimer's Unit	No
FENTON	MO 63026-5613	Level of Care: SNF	Bed Capacity	144
Mailing Address 560 CORISANDE HII		County JEFFERSON	DMH Licensed	No
FENTON	MO 63026-5613	Region 2 Medicare/Medicaid	Facility Number	01800
COTTAGE AT CENTURY PINES, TI	не			
707 EAST MCCRACKEN ROAD		<b>Telephone</b> (417) 581-7278	Alzheimer's Unit	Yes
OZARK	MO 65721-9499	Level of Care: ALF**	Bed Capacity	24
Mailing Address 709 EAST MCCRACI	KEN ROAD	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-9499	Region 1	Facility Number	30579
		· ·		
COTTAGES OF LAKE ST LOUIS				
2885 TECHNOLOGY DRIVE		<b>Telephone</b> (636) 614-3510	Alzheimer's Unit	No
LAKE SAINT LOUIS	MO 63367-4123	Level of Care: SNF	Bed Capacity	60
Mailing Address 2885 TECHNOLOGY	DRIVE	County SAINT CHARLES	DMH Licensed	No
LAKE SAINT LOUIS	MO 63367-4123	Region 5 Medicare	Facility Number	30318
COTTON POINT LIVING CENTER				
609 SOUTH RAILROAD ST		<b>Telephone</b> (573) 471-7861	Alzheimer's Unit	Yes
MATTHEWS	MO 63867-9751	Level of Care: SNF	Bed Capacity	98
Mailing Address 609 SOUTH RAILRO	AD ST	County NEW MADRID	DMH Licensed	No
MATTHEWS	MO 63867-9751	Region 2 Medicare/Medicaid	Facility Number	07057
COUNTDY AIDE ESTATES 11 C				
COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN		Tolophone (573) 221 5400	Alzheimer's Unit	Νο
HANNIBAL	MO 63401-7356	Telephone (573) 221-5400 Level of Care: RCF*		No 16
Mailing Address 49303 RENSSELAER		County RALLS	Bed Capacity DMH Licensed	Yes
HANNIBAL		•		
NAMINIDAL	MO 63401-7356	Region 5	Facility Number	14270
COUNTRY AIRE RETIREMENT CE	NTER			
18540 STATE HIGHWAY 16		<b>Telephone</b> (573) 215-2216	Alzheimer's Unit	No
LEWISTOWN	MO 63452-2111	Level of Care: SNF	Bed Capacity	60
Mailing Address 18540 STATE HIGHV		County LEWIS	DMH Licensed	No
LEWISTOWN	MO 63452-2111	Region 5 Medicare/Medicaid	Facility Number	16896

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COUNTRY AIRE RETIREMENT CENTER		
18540 STATE HIGHWAY 16	<b>Telephone</b> (573) 215-2216	Alzheimer's Unit No
LEWISTOWN MO 63452-211	1 Level of Care: RCF*	Bed Capacity 8
Mailing Address 18540 STATE HIGHWAY 16	<b>County</b> LEWIS	<b>DMH Licensed</b> No
LEWISTOWN MO 63452-211	1 Region 5	Facility Number 16896
COUNTRY CLUB REHAB AND HEALTHCARE CEM		
503 REGENT DR	<b>Telephone</b> (660) 429-4444	Alzheimer's Unit No
WARRENSBURG MO 64093-323	Level of Care: SNF	<b>Bed Capacity</b> 73
Mailing Address 503 REGENT DR	<b>County</b> JOHNSON	<b>DMH Licensed</b> No
WARRENSBURG MO 64093-323	Region 3 Medicare/Medicaid	Facility Number 20892
COUNTRY CLUB REHAB AND HEALTHCARE CEN		A11
503 REGENT DR	<b>Telephone</b> (660) 429-4444	Alzheimer's Unit No
WARRENSBURG MO 64093-323		Bed Capacity 40
Mailing Address 503 REGENT DR	County JOHNSON	DMH Licensed No
WARRENSBURG MO 64093-323	<b>Region</b> 3	Facility Number 20892
COUNTRY LIVING ASSISTED LIVING		
2820 NORTH MAIN ST	<b>Telephone</b> (417) 926-1955	Alzheimer's Unit No
MOUNTAIN GROVE MO 65711-140	•	Bed Capacity 40
Mailing Address 2820 NORTH MAIN ST	County WRIGHT	DMH Licensed No
MOUNTAIN GROVE MO 65711-140		Facility Number 27548
Mooning Grove	Kegion 1	racinty Number 27546
COUNTRY MEADOWS		
1301 N ST JOE DR	<b>Telephone</b> (573) 431-2889	Alzheimer's Unit No
PARK HILLS MO 63601-196	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 1301 N ST JOE DR	County SAINT FRANCOIS	DMH Licensed No
PARK HILLS MO 63601-196	Region 2 Medicare/Medicaid	Facility Number 14443
COUNTRY MEADOWS	Talankana (572) 421 2000	A 1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
1301 N ST JOE DR	<b>Telephone</b> (573) 431-2889	Alzheimer's Unit No
PARK HILLS MO 63601-196		Bed Capacity 15
Mailing Address 1301 N ST JOE DR	County SAINT FRANCOIS	DMH Licensed No
PARK HILLS MO 63601-196	Region 2	Facility Number 14443
COUNTRY OAK VILLAGE		
101 CROSS CREEK DR	<b>Telephone</b> (816) 224-2700	Alzheimer's Unit No
GRAIN VALLEY MO 64029-956	_	Bed Capacity 32
Mailing Address 101 CROSS CREEK DR	County JACKSON	DMH Licensed No
GRAIN VALLEY MO 64029-956	·	Facility Number 24279
5,500		2721)
COUNTRY PLACE		
28601 US HIGHWAY 61	<b>Telephone</b> (573) 264-1555	Alzheimer's Unit No
SCOTT CITY MO 63780-914		<b>Bed Capacity</b> 24
Mailing Address 28601 US HIGHWAY 61	County SCOTT	<b>DMH Licensed</b> No
SCOTT CITY MO 63780-914	Region 2	Facility Number 25934

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COUNTRY VALLEY HOME				
15750 COUNTY RD 2430		<b>Telephone</b> (573) 265-8250	Alzheimer's Unit	No
SAINT JAMES	MO 65559-8211	Level of Care: RCF*	Bed Capacity	23
Mailing Address 15750 COUNTY RI		County PHELPS	DMH Licensed	Yes
SAINT JAMES	MO 65559-8211	Region 6	Facility Number	01852
COUNTRY VIEW NURSING FACI	LITY, INC			
2106 WEST MAIN ST	222 2, 21 (0	<b>Telephone</b> (573) 324-2216	Alzheimer's Unit	No
BOWLING GREEN	MO 63334-1049	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 330	1120 00001 1019	County PIKE	DMH Licensed	No
BOWLING GREEN	MO 63334-0330	Region 5 Medicare/Medicaid	Facility Number	14926
COUNTRYSIDE CARE CENTER, I	H.C			
385 SOUTH EISENHOWER		<b>Telephone</b> (417) 235-4040	Alzheimer's Unit	No
MONETT	MO 65708-8266	Level of Care: RCF*	Bed Capacity	33
Mailing Address PO BOX 434	1120 02700 0200	County BARRY	DMH Licensed	Yes
MONETT	MO 65708-0434	Region 1	Facility Number	12737
			·	
COUNTRYSIDE ESTATES				
500 NORTH OHIO		<b>Telephone</b> (660) 476-2128	Alzheimer's Unit	No
APPLETON CITY	MO 64724-1625	Level of Care: RCF*	Bed Capacity	24
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed	No
APPLETON CITY	MO 64724-0098	Region 1	Facility Number	15005
COUNTRYSIDE HOME, LLC				
24499 PARK DR		<b>Telephone</b> (417) 532-7418	Alzheimer's Unit	No
LEBANON	MO 65536-5843	Level of Care: RCF	Bed Capacity	20
Mailing Address 24499 PARK DR		County LACLEDE	DMH Licensed	Yes
LEBANON	MO 65536-5843	Region 1	Facility Number	15052
CD AD ADDI E VII I ACE CENIOD				
CRAB APPLE VILLAGE SENIOR 214 HARTMAN PL, SUITE 100	ESTATES	<b>Telephone</b> (636) 629-6161	Alzheimer's Unit	Yes
SAINT CLAIR	MO 63077-2458	Level of Care: ALF**	Bed Capacity	65
Mailing Address 214 HARTMAN PL		County FRANKLIN	DMH Licensed	No
SAINT CLAIR	MO 63077-2458	Region 6	Facility Number	24395
DIMIT CLIM	110 03077 2130	Region 0	ruemey rumoer	24373
CRANE RESIDENTIAL CARE HO	ME			
102 LILLIAN		<b>Telephone</b> (417) 723-5900	Alzheimer's Unit	No
CRANE	MO 65633-9103	Level of Care: RCF	<b>Bed Capacity</b>	36
Mailing Address 102 LILLIAN		County STONE	DMH Licensed	Yes
CRANE	MO 65633-9103	Region 1	Facility Number	01898
CRAWFORD RANCH BOARDING	HOME, LLC			
2200 VARVERA RD	•	<b>Telephone</b> (573) 756-4656	Alzheimer's Unit	No
DOE RUN	MO 63637-3121	Level of Care: RCF*	Bed Capacity	32
Mailing Address 2200 VARVERA R	D	County SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN	MO 63637-3121	Region 2	Facility Number	13193

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CRESTVIEW HOME		T. L. L. (660) 405 2120	All to Little
1313 SOUTH 25TH ST	NO (1404.0504	<b>Telephone</b> (660) 425-3128	Alzheimer's Unit No
BETHANY M. III. A LL DO DOY 420	MO 64424-2634	Level of Care: SNF	Bed Capacity 92
Mailing Address PO BOX 430	MO (4424 0420	County HARRISON	DMH Licensed No
BETHANY	MO 64424-0430	Region 4 Medicare/Medicaid	Facility Number 01936
CRESTWOOD HEALTH CARE CENT	TER. LLC		
11400 MEHL AVE	223, 220	<b>Telephone</b> (314) 741-3525	Alzheimer's Unit No
FLORISSANT	MO 63033-7204	Level of Care: SNF	Bed Capacity 150
Mailing Address 11400 MEHL AVE		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63033-7204	Region 7 Medicare/Medicaid	Facility Number 14296
CREVE COEUR ASSISTED LIVING A	AND MEMODY CADE		
693 DECKER LN	AND MEMORI CARE	<b>Telephone</b> (314) 997-4532	Alzheimer's Unit Yes
CREVE COEUR	MO 63141-7127	Level of Care: ALF**	Bed Capacity 110
Mailing Address 693 DECKER LANE	10 03141 7127	County SAINT LOUIS COUNTY	DMH Licensed No
CREVE COEUR	MO 63141-7127	Region 7	Facility Number 29440
CREVE COLOR	110 03141 /12/	Region /	29440
CREVE COEUR MANOR			
1127 TIMBER RUN DR		<b>Telephone</b> (314) 434-8361	Alzheimer's Unit No
SAINT LOUIS	MO 63146-4482	Level of Care: SNF	<b>Bed Capacity</b> 149
Mailing Address 1127 TIMBER RUN D	R	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63146-4482	Region 7 Medicare/Medicaid	Facility Number 02417
CROSS CREEK AT LEE'S SUMMIT			
3320 NE WILSHIRE DR		<b>Telephone</b> (816) 607-5700	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64064-2077	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 3320 NE WILSHIRE D	PR	County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64064-2077	Region 3	Facility Number 30996
CROWLEY RIDGE CARE CENTER		<b>Telephone</b> (573) 624-5557	Alzheimer's Unit Yes
1204 NORTH OUTER RD DEXTER	MO 63841-8684	Telephone (573) 624-5557 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 90
Mailing Address PO BOX 668	100 03041-0004	County STODDARD	DMH Licensed No
DEXTER	MO 63841-0668	Region 2 Medicare/Medicaid	Facility Number 12667
DEATER	WO 03041-0000	Region 2 Medicare/Medicaid	racinty Number 12007
CROWN REHAB AND HEALTHCAR	E CENTER		
3001 EAST ELM		<b>Telephone</b> (816) 380-6525	Alzheimer's Unit No
HARRISONVILLE	MO 64701-1196	Level of Care: SNF	Bed Capacity 118
Mailing Address 3001 EAST ELM		County CASS	<b>DMH Licensed</b> No
HARRISONVILLE	MO 64701-1196	Region 3 Medicare/Medicaid	Facility Number 21031
CRYSTAL CREEK HEALTH AND RE	EHABILITATION CENTER		
250 NEW FLORISSANT RD SOUTH		<b>Telephone</b> (314) 838-2211	Alzheimer's Unit No
FLORISSANT	MO 63031-6716	Level of Care: SNF	Bed Capacity 158
Mailing Address 250 NEW FLORISSAN	IT RD SOUTH	County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63031-6716	Region 7 Medicare/Medicaid	Facility Number 05782

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CRANGE IX OLIVE			
CRYSTAL OAKS	T. I		**
1500 CALVARY CHURCH RD	<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS MO 63028-4125	Level of Care: SNF	Bed Capacity	131
Mailing Address 1500 CALVARY CHURCH RD	County JEFFERSON	DMH Licensed	No
FESTUS MO 63028-4125	Region 2 Medicare/Medicaid	Facility Number	99932
CRYSTAL OAKS			
1500 CALVARY CHURCH RD	<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS MO 63028-4125	Level of Care: ALF**	<b>Bed Capacity</b>	60
Mailing Address 1500 CALVARY CHURCH RD	<b>County</b> JEFFERSON	DMH Licensed	No
FESTUS MO 63028-4125	Region 2	Facility Number	99932
CUBA MANOR, INC			
210 ELDON DR	<b>Telephone</b> (573) 885-4500	Alzheimer's Unit	No
CUBA MO 65453-1642	Level of Care: SNF	Bed Capacity	90
Mailing Address 210 ELDON DR	County CRAWFORD	DMH Licensed	No
CUBA MO 65453-1642	Region 6 Medicare/Medicaid	Facility Number	21149
CURRENT RIVER NURSING CENTER, INC	(572) 006 4020		NO
1015 NORTH GRAND AVE DONIPHAN MO 63935-1779	<b>Telephone</b> (573) 996-4239	Alzheimer's Unit	NO 120
	Level of Care: SNF  County RIPLEY	Bed Capacity	120 No
Mailing Address 1015 NORTH GRAND AVE DONIPHAN MO 63935-1779		DMH Licensed	No
DONIFHAN MO 03933-1779	Region 2 Medicare/Medicaid	Facility Number	17125
CYPRESS POINT - SKILLED NURSING BY AMERICARE			
801 BAILIFF DR	<b>Telephone</b> (573) 624-8908	Alzheimer's Unit	No
DEXTER MO 63841-9500	Level of Care: SNF	Bed Capacity	79
Mailing Address 801 BAILIFF DR	County STODDARD	DMH Licensed	No
DEXTER MO 63841-9500	Region 2 Medicare/Medicaid	Facility Number	08315
DAVIESS COUNTY NURSING AND REHABILITATION			
1337 WEST GRAND	<b>Telephone</b> (660) 663-2197	Alzheimer's Unit	Yes
GALLATIN MO 64640-8320	Level of Care: SNF	<b>Bed Capacity</b>	97
Mailing Address 1337 WEST GRAND	County DAVIESS	DMH Licensed	No
GALLATIN MO 64640-8320	Region 4 Medicare/Medicaid	Facility Number	02032
DAYBREAK NURSING CENTER			
410 H ROAD	<b>Telephone</b> (573) 471-7683	Alzheimer's Unit	No
SIKESTON MO 63801-5350	Level of Care: SNF	Bed Capacity	70
Mailing Address 410 H ROAD	County SCOTT	DMH Licensed	No
SIKESTON MO 63801-0430	Region 2 Medicare/Medicaid	Facility Number	11496
DELHAVEN MANOR			
5460 DELMAR BLVD	<b>Telephone</b> (314) 361-2902	Alzheimer's Unit	No
SAINT LOUIS MO 63112-3104	Level of Care: SNF	Bed Capacity	156
Mailing Address 5460 DELMAR BLVD	County SAINT LOUIS CITY	DMH Licensed	No
GADWI OTHS		T N	0000=

Medicare/Medicaid

**Facility Number** 

02089

MO 63112-3104

SAINT LOUIS

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DELMAR GARDENS NORTH				
4401 PARKER ROAD		<b>Telephone</b> (314) 355-1516	Alzheimer's Unit	Yes
BLACK JACK	MO 63033-4266	Level of Care: SNF	Bed Capacity	240
Mailing Address 4401 PARKER ROAD	)	County SAINT LOUIS COUNTY	DMH Licensed	No
BLACK JACK	MO 63033-4266	Region 7 Medicare/Medicaid	Facility Number	14093
DELMAR GARDENS OF CHESTERI	FIELD			
14855 NORTH OUTER 40 RD	TIELD	<b>Telephone</b> (636) 532-0150	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-2026	Level of Care: SNF	Bed Capacity	237
Mailing Address 14855 NORTH OUTE		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-2026	_	Facility Number	
CHESTERFIELD	WO 03017-2020	Region 7 Medicare/Medicaid	racinty Number	02111
DELMAR GARDENS OF CREVE CO	DEUR			
850 COUNTRY MANOR LN		<b>Telephone</b> (314) 434-5900	Alzheimer's Unit	No
CREVE COEUR	MO 63141-6651	Level of Care: SNF	<b>Bed Capacity</b>	148
Mailing Address 850 COUNTRY MAN	OR LN	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63141-6651	Region 7 Medicare/Medicaid	Facility Number	01830
DELMAR GARDENS OF MERAMEO	NATI EV			
1 ARBOR TERRACE	VALLET	<b>Telephone</b> (636) 343-0016	Alzheimer's Unit	Yes
FENTON	MO 63026-3900	Level of Care: SNF	Bed Capacity	190
Mailing Address 1 ARBOR TERRACE		County SAINT LOUIS COUNTY	DMH Licensed	No
FENTON	MO 63026-3900			
FENTON	MO 03020-3900	Region 7 Medicare/Medicaid	Facility Number	13468
DELMAR GARDENS OF O'FALLON	I			
7068 SOUTH OUTER 364		<b>Telephone</b> (636) 240-6100	Alzheimer's Unit	Yes
O'FALLON	MO 63368-7757	Level of Care: SNF	Bed Capacity	240
Mailing Address 7068 SOUTH OUTER	364	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-7757	Region 5 Medicare/Medicaid	Facility Number	24291
DELMAR GARDENS ON THE GREE	EN			
15197 CLAYTON RD		<b>Telephone</b> (636) 394-7515	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-7048	Level of Care: SNF	Bed Capacity	180
Mailing Address 15197 CLAYTON RD	1	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-7048	Region 7 Medicare/Medicaid	Facility Number	01515
DELMAR GARDENS SOUTH				
5300 BUTLER HILL ROAD		<b>Telephone</b> (314) 842-0588	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63128-4152	Level of Care: SNF	Bed Capacity	250
Mailing Address 5300 BUTLER HILL H		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4152	Region 7 Medicare/Medicaid	Facility Number	12909
			- 1	12/0/
DELMAR GARDENS WEST		m		
13550 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 878-1330	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-5812	Level of Care: SNF	Bed Capacity	321
Mailing Address 13550 SOUTH OUTE	K 40 KD	County SAINT LOUIS COUNTY	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

02120

MO 63017-5812

TOWN AND COUNTRY

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DELTA SOUTH NURSING & REHABILITAT	TION			
640 COLONEL GEORGE E DAY PARKWAY	Telepho	ne (573) 471-3400	Alzheimer's Unit	No
SIKESTON MO 633	1801-0624 Level of	Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 640 COLONEL GEORGE E DA	AY PARKWAY County	NEW MADRID	DMH Licensed	No
SIKESTON MO 633	Region Region	2 Medicare/Medicaid	<b>Facility Number</b>	30584
DIANA'S BOARDING HOME 1, INC				
15432 STATE HIGHWAY M	Telepho	ne (573) 866-2010	Alzheimer's Unit	No
	1764-7487 Level of	, ,	Bed Capacity	20
Mailing Address 15431 STATE HIGHWAY M	County	BOLLINGER	DMH Licensed	Yes
	7764-7487 Region		Facility Number	11123
MARGEE THEE	Kegion Kegion	2	racinty Number	11123
DIANA'S BOARDING HOME 2				
25140 BUZZARD DR	Telepho		Alzheimer's Unit	No
	7764-9408 <b>Level of</b>		Bed Capacity	40
Mailing Address HC 64, BOX 4677	County	BOLLINGER	DMH Licensed	Yes
MARBLE HILL MO 63'	7764-9408 <b>Region</b>	2	Facility Number	23940
DIXON NURSING & REHAB				
403 EAST 10TH ST	Telepho	ne (573) 759-2135	Alzheimer's Unit	No
DIXON MO 654	459-6049 <b>Level of</b>	Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 403 EAST 10TH ST	County	PULASKI	DMH Licensed	No
DIXON MO 654	459-6049 <b>Region</b>	6 Medicare/Medicaid	<b>Facility Number</b>	15510
DOLAN MEMORY CARE AT CALAIS				
1225 TENNANT RD	Telepho	ne (314) 569-9060	Alzheimer's Unit	Yes
	1146-5523 Level of	` '	Bed Capacity	44
Mailing Address 1225 TENNANT RD	County	SAINT LOUIS COUNTY	DMH Licensed	No
	1146-5523 <b>Region</b>		Facility Number	27755
5.11.11 20015	Region	•	I welling I will be I	21133
DOLAN MEMORY CARE AT CONWAY				
12550 CONWAY RD	Telepho	, ,	Alzheimer's Unit	Yes
	141-8613 <b>Level of</b>		Bed Capacity	9
Mailing Address 12550 CONWAY RD	County	SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR MO 63	Region Region	7	Facility Number	22648
DOLAN MEMORY CARE AT FRONTIER				
11566 FRONTIER DR	Telepho	ne (314) 995-5331	Alzheimer's Unit	Yes
SAINT LOUIS MO 63	146-4873 <b>Level of</b>	Care: ALF**	Bed Capacity	20
Mailing Address PO BOX 4082	County	SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD MO 630	Region Region	7	<b>Facility Number</b>	25162
DOLAN MEMODY CADE AT MACON BEAN	ND.			
DOLAN MEMORY CARE AT MASON MANO 12740 MASON MANOR	JK Telepho	ne (314) 576-6200	Alzheimer's Unit	Yes
	141-7350 Level of		Bed Capacity	8
Mailing Address 12740 MASON MANOR	County	SAINT LOUIS COUNTY	DMH Licensed	No
	1141-7350 Region		Facility Number	19861
STILLT LOOIS WO 03.	Kegion Kegion	•	racincy manifest	17001

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DOLAN MEMORY CARE AT SCHU 1706 SCHUETZ RD	ETZ	Tolonhous (214) 090 1792	Alahaiman'a Unit	Yes
SAINT LOUIS	MO 63146-4931	Telephone (314) 989-1782 Level of Care: ALF**	Alzheimer's Unit	10
Mailing Address 1706 SCHUETZ RD	WIO 03140-4931	County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	No
SAINT LOUIS	MO 63146-4931	·		
SAINT LOUIS	MO 03140-4931	Region 7	Facility Number	23805
DOLAN MEMORY CARE AT WATE	FREORD CROSSING			
11350 DOLAN WAY	ERI ORD CROSSING	<b>Telephone</b> (314) 993-9500	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63146-5533	Level of Care: ALF**	Bed Capacity	88
Mailing Address PO BOX 4082	110 03110 3333	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63006-4082	Region 7		31366
		•		
DOUGHERTY FERRY ASSISTED L	IVING & MEMORY CARE			
2929 DOUGHERTY FERRY RD		<b>Telephone</b> (636) 825-6665	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63122-3368	Level of Care: ALF**	Bed Capacity	110
Mailing Address 2929 DOUGHERTY I	FERRY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63122-3368	Region 7	Facility Number	30034
DUNN-DUNN HOUSE LLC				
2133 JANNETTE DR		<b>Telephone</b> (314) 869-2431	Alzheimer's Unit	No
SAINT LOUIS	MO 63136-4020	Level of Care: RCF	Bed Capacity	10
Mailing Address 2133 JANNETTE DR		County SAINT LOUIS COUNTY	DMH Licensed	Yes
SAINT LOUIS	MO 63136-4020	Region 7		14694
STAINT ECOLO	140 03130 4020	Acgion /	racinty Number	14024
DUTCHTOWN CARE CENTER				
3421 GASCONADE ST		<b>Telephone</b> (314) 832-4700	Alzheimer's Unit	No
SAINT LOUIS	MO 63118-4201	Level of Care: SNF	Bed Capacity	120
Mailing Address 3421 GASCONADE S	ST	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63118-4201	Region 7 Medicare/Medicaid	Facility Number	21455
E W THOMPSON HEALTH & REHA	ARILITATION CENTER			
975 MITCHELL ROAD	DELITITION CENTER	<b>Telephone</b> (660) 851-0668	Alzheimer's Unit	Yes
SEDALIA	MO 65301-2133	Level of Care: SNF	Bed Capacity	60
Mailing Address 975 MITCHELL ROA		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2133	Region 6 Medicare/Medicaid		30182
		· ·		
EASTVIEW MANOR CARE CENTE	R			
1622 EAST 28TH ST		<b>Telephone</b> (660) 359-2251	Alzheimer's Unit	No
TRENTON	MO 64683-1104	Level of Care: SNF	Bed Capacity	90
Mailing Address 1622 EAST 28TH ST		County GRUNDY	DMH Licensed	No
TRENTON	MO 64683-1104	Region 4 Medicare/Medicaid	Facility Number	18267
EDGEWOOD MANOR HEALTH CA	RE CENTER			
11900 JESSICA LN		<b>Telephone</b> (816) 358-7858	Alzheimer's Unit	No
RAYTOWN	MO 64138-2649	Level of Care: SNF	Bed Capacity	91
Mailing Address 11900 JESSICA LN		County JACKSON	DMH Licensed	No
RAYTOWN	MO 64138-2649	Region 3 Medicare/Medicaid	Facility Number	14119
		=		

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EL DORADO SPRINGS RESIDENTIAL	CARE		
805 NORTH JACKSON ST		<b>Telephone</b> (417) 876-4278	Alzheimer's Unit No
	O 64744-2912	Level of Care: RCF	<b>Bed Capacity</b> 60
Mailing Address 805 NORTH JACKSON S		County CEDAR	<b>DMH Licensed</b> Yes
EL DORADO SPRINGS M	O 64744-2912	Region 1	Facility Number 12621
ELDON NURSING & REHAB			
1001 E NORTH ST		<b>Telephone</b> (573) 392-3164	Alzheimer's Unit Yes
ELDON M	IO 65026-2634	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1001 E NORTH ST		County MILLER	DMH Licensed No
ELDON M	IO 65026-2634	Region 6 Medicare/Medicaid	Facility Number 06139
ELIZABETH HOUSE			
12284 DE PAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit No
	O 63044-2508	Level of Care: SNF	Bed Capacity 54
Mailing Address 12284 DE PAUL DR	03044 2300	County SAINT LOUIS COUNTY	DMH Licensed No
_	IO 63044-2508	Region 7	Facility Number 22316
BRIDGETOTV IVI	2500	Kegion /	22310
ELSBERRY MISSOURI HEALTH CARE	E CENTER		
1827 HIGHWAY B		<b>Telephone</b> (573) 898-2880	Alzheimer's Unit NO
	O 63343-3126	Level of Care: ALF**	<b>Bed Capacity</b> 12
Mailing Address 1827 HIGHWAY B		County LINCOLN	<b>DMH Licensed</b> No
ELSBERRY M	IO 63343-3126	Region 5	Facility Number 02336
ELSBERRY MISSOURI HEALTH CARE	E CENTER		
1827 HIGHWAY B		<b>Telephone</b> (573) 898-2880	Alzheimer's Unit No
ELSBERRY	O 63343-3126	Level of Care: SNF	<b>Bed Capacity</b> 56
Mailing Address 1827 HWY B		County LINCOLN	<b>DMH Licensed</b> No
ELSBERRY M	IO 63343-3126	Region 5 Medicare/Medicaid	Facility Number 02336
EQUILIBRIUM RANCH			
81 PILKENTON LN		<b>Telephone</b> (573) 885-6443	Alzheimer's Unit No
CUBA M	O 65453-8136	Level of Care: RCF	<b>Bed Capacity</b> 18
Mailing Address 81 PILKENTON LN		County CRAWFORD	<b>DMH Licensed</b> No
CUBA M	IO 65453-8136	Region 6	Facility Number 15026
ESSEX BY BRISTOL, THE			
301 EAST 3RD		<b>Telephone</b> (660) 829-1758	Alzheimer's Unit No
	IO 65301-4335	Level of Care: RCF	Bed Capacity 24
Mailing Address 301 EAST 3RD		County PETTIS	DMH Licensed No
· ·	O 65301-4335	Region 6	Facility Number 23020
ESSEX OF CONCORDIA, THE			
402 REDBUD		<b>Telephone</b> (660) 463-0200	Alzheimer's Unit No
	IO 64020-8358	Level of Care: RCF	Bed Capacity 12
Mailing Address 402 REDBUD		County LAFAYETTE	DMH Licensed No
_	IO 64020-8358	Region 3	Facility Number 24461
		<b>9</b> -	

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ESSEX OF GRAIN VALLEY, THE				
401 SOUTHWEST ROCK CREEK LN	Telephone	(816) 443-3992	Alzheimer's Unit	No
	54029-8460 Level of Care	` '	Bed Capacity	12
Mailing Address 401 SOUTHWEST ROCK CRI		ACKSON	DMH Licensed	No
8	54029-8460 <b>Region</b> 3		Facility Number	24475
SIGHT, VILLET	region 5		Tuesing Tuninger	24473
ESSEX OF LEBANON, THE				
1316 DEADRA DR	Telephone	(417) 532-4863	Alzheimer's Unit	No
LEBANON MO 6	55536-4609 Level of Care	: RCF	Bed Capacity	12
Mailing Address 1316 DEADRA DR	County L	ACLEDE	DMH Licensed	No
LEBANON MO 6:	55536-4609 <b>Region</b> 1		Facility Number	24257
EGGEN OF MENTOO THE				
ESSEX OF MEXICO, THE 1109 OLD FARM RD WEST	T-11.	(572) 501 5002	Alghoimenta II	NT =
	Telephone	(573) 581-5223 : RCF	Alzheimer's Unit	No 12
Mailing Address 1109 OLD FARM RD WEST	55265-3250 Level of Care	; RCF .UDRAIN	Bed Capacity DMH Licensed	12 No
_	• • • • • • • • • • • • • • • • • • • •	IUDKAIN		
MEAICO MO 0.	55265-3250 <b>Region</b> 5		Facility Number	24425
ESSEX OF OZARK, THE				
5173 NORTH 22ND	Telephone	(417) 485-4185	Alzheimer's Unit	No
OZARK MO 6	55721-7637 Level of Care	: RCF	<b>Bed Capacity</b>	12
Mailing Address 5173 NORTH 22ND	County C	HRISTIAN	DMH Licensed	No
OZARK MO 6	55721-7637 <b>Region</b> 1		Facility Number	24318
ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR	Telephone	(314) 355-8833	Alzheimer's Unit	No
	53138-1757 Level of Care	` '	Bed Capacity	38
Mailing Address 11728 HIDDEN LAKE DR		AINT LOUIS COUNTY	DMH Licensed	No
	63138-1757 <b>Region</b> 7	THIN EGGIS COUNT	Facility Number	18442
me of	Region /		Tuestey Tunner	10442
ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR	Telephone	(314) 355-8833	Alzheimer's Unit	No
SAINT LOUIS MO 63	53138-1757 <b>Level of Care</b>	: SNF	Bed Capacity	67
Mailing Address 11728 HIDDEN LAKE DR	•	AINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63	33138-1757 <b>Region</b> 7	Medicare/Medicaid	Facility Number	18442
ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR	Telephone	(314) 355-8833	Alzheimer's Unit	No
SAINT LOUIS MO 6	53138-1757 Level of Care	` '	Bed Capacity	38
Mailing Address 11728 HIDDEN LAKE DR		AINT LOUIS COUNTY	DMH Licensed	No
	53138-1757 <b>Region</b> 7		Facility Number	18442
ESTATES OF PERRYVILLE, LLC, THE				
430 NORTH WEST ST	Telephone	(573) 547-1011	Alzheimer's Unit	No
	53775-1359 Level of Care		Bed Capacity	156
Mailing Address 430 NORTH WEST ST		ERRY	DMH Licensed	No
_	73775-1359 <b>Region</b> 2	Medicare/Medicaid	Facility Number	00137
I LIKE TILLE MO 0.	Negiuli 4	Miculcal C/Miculcalu	i acinty i tallibel	00137

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ESTATES OF SPANISH LAKE, THE	<u> </u>			
610 PRIGGE ROAD		<b>Telephone</b> (314) 741-9393	Alzheimer's Unit	lo
SAINT LOUIS	MO 63138-3543	Level of Care: SNF	Bed Capacity 15	50
Mailing Address 610 PRIGGE ROAD		County SAINT LOUIS COUNTY	DMH Licensed N	Ю
SAINT LOUIS	MO 63138-3543	Region 7 Medicare/Medicaid	Facility Number 1526	
		Tregion Production of Production		
ESTATES OF ST LOUIS, LLC, THE	2			
2115 KAPPEL DR		<b>Telephone</b> (314) 867-7474		Ю
SAINT LOUIS	MO 63136-4115	Level of Care: SNF		94
Mailing Address 2115 KAPPEL DR		County SAINT LOUIS COUNTY	DMH Licensed N	Ю
SAINT LOUIS	MO 63136-4115	Region 7 Medicare/Medicaid	Facility Number 0534	10
FAIR VIEW NURSING HOME				
1714 WEST 16TH ST		<b>Telephone</b> (660) 827-1594	Alzheimer's Unit	lo
SEDALIA	MO 65301-5273	Level of Care: SNF	Bed Capacity 7	75
Mailing Address 1714 WEST 16TH ST	Γ	County PETTIS	DMH Licensed N	lo
SEDALIA	MO 65301-5273	Region 6 Medicare/Medicaid	Facility Number 0246	59
FAIDMON'E ON CLAVTON				
FAIRMONT ON CLAYTON		(214) (46 7600	All the Late to the St.	
7920 CLAYTON ROAD	MO (2117 1227	<b>Telephone</b> (314) 646-7600	Alzheimer's Unit Yo	
RICHMOND HEIGHTS	MO 63117-1327	Level of Care: ICF		90
Mailing Address 7920 CLAYTON RO.		County SAINT LOUIS COUNTY		lo Io
RICHMOND HEIGHTS	MO 63117-1327	Region 7	Facility Number 2414	ļ9
FAMILY COUNSELING CENTER II	NC			
18408 WAYNE ROUTE D		<b>Telephone</b> (573) 222-8676	Alzheimer's Unit	lo
WAPPAPELLO	MO 63966-	Level of Care: RCF*	Bed Capacity 2	27
Mailing Address 18408 WAYNE ROU	JTE D	County WAYNE	DMH Licensed Ye	es
WAPPAPELLO	MO 63966-	Region 2	Facility Number 2358	34
FAMILY PARTNERS HOME LLC				
232 CREVE COEUR AVE		<b>Telephone</b> (314) 686-4468	Alzheimer's Unit Yo	
SAINT LOUIS	MO 63011-4040	Level of Care: ALF**	Bed Capacity	8
Mailing Address 12882 MANCHESTE		County SAINT LOUIS COUNTY		Ю
SAINT LOUIS	MO 63131-1803	Region 7	Facility Number 3049	)2
FAMILY PARTNERS MANCHESTE	ER, LLC			
351 FOREST SUMMIT COURT		<b>Telephone</b> (314) 686-4468	Alzheimer's Unit Ye	es
MANCHESTER	MO 63021-5509	Level of Care: ALF**	Bed Capacity 1	12
Mailing Address 351 FOREST SUMM	IIT COURT	County SAINT LOUIS COUNTY	DMH Licensed N	Ю
MANCHESTER	MO 63021-5509	Region 7	Facility Number 3247	13
FARMINGTON MANOR				
2879 US HIGHWAY 67		<b>Telephone</b> (573) 756-7566	Alzheimer's Unit	lo
FARMINGTON	MO 63640-9168	Level of Care: ALF	Bed Capacity 7	70
Mailing Address 2879 US HWY 67		County SAINT FRANCOIS	DMH Licensed Yo	es
FARMINGTON	MO 63640-9168	Region 2	Facility Number 1514	10
		g ·	•	

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FARMINGTON PRESBYTERIAN M	ANOR		
500 CAYCE ST		<b>Telephone</b> (573) 756-6768	Alzheimer's Unit No
FARMINGTON	MO 63640-2910	Level of Care: ALF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-2910	Region 2	Facility Number 06181
FARMINGTON PRESBYTERIAN M	ANOR	m • • (572) 756 (760	
500 CAYCE ST	MO (2640 2010	<b>Telephone</b> (573) 756-6768	Alzheimer's Unit Yes
FARMINGTON	MO 63640-2910	Level of Care: SNF	Bed Capacity 90
Mailing Address 500 CAYCE ST	MO (2640 2010	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-2910	Region 2 Medicare/Medicaid	Facility Number 06181
FARMINGTON PRESBYTERIAN M	ANOR		
500 CAYCE ST	······································	<b>Telephone</b> (573) 756-6768	Alzheimer's Unit No
FARMINGTON	MO 63640-2910	Level of Care: RCF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-2910	Region 2	Facility Number 06181
		Region 2	Tuesdey Training Trai
FERNDALE, INC			
15677 COUNTY RD 2430		<b>Telephone</b> (573) 265-3344	Alzheimer's Unit No
SAINT JAMES	MO 65559-8210	Level of Care: ALF	<b>Bed Capacity</b> 32
Mailing Address 15677 COUNTY RD	2430	County PHELPS	<b>DMH Licensed</b> Yes
SAINT JAMES	MO 65559-8210	Region 6	Facility Number 02526
FESTUS MANOR			
627 WESTWOOD DR S		<b>Telephone</b> (636) 931-9066	Alzheimer's Unit No
FESTUS	MO 63028-2062	Level of Care: SNF	Bed Capacity 150
Mailing Address 627 WESTWOOD DI	RS	<b>County</b> JEFFERSON	DMH Licensed No
FESTUS	MO 63028-2062	Region 2 Medicare/Medicaid	Facility Number 02546
FIELD POINTE ASSISTED LIVING	BY AMERICARE	T. 1 (01.6) (00.100)	
5002 GENE FIELD ROAD	NO 51705 0075	<b>Telephone</b> (816) 688-4001	Alzheimer's Unit Yes
SAINT JOSEPH	MO 64506-2056	Level of Care: ALF**	Bed Capacity 65
Mailing Address 5002 GENE FIELD R		County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-2056	Region 4	Facility Number 32538
FIESER NURSING CENTER			
404 MAIN ST		<b>Telephone</b> (636) 343-4344	Alzheimer's Unit No
FENTON	MO 63026-4107	Level of Care: SNF	Bed Capacity 60
Mailing Address 404 MAIN ST		County SAINT LOUIS COUNTY	DMH Licensed No
FENTON	MO 63026-4107	Region 7 Medicaid	Facility Number 02569
FLORISSANT VALLEY HEALTH &	REHABILITATION CENTER		
1200 GRAHAM RD		<b>Telephone</b> (314) 838-6555	Alzheimer's Unit No
FLORISSANT	MO 63031-8015	Level of Care: SNF	<b>Bed Capacity</b> 98
Mailing Address 1200 GRAHAM RD		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
FLORISSANT	MO 63031-8015	Region 7 Medicare/Medicaid	Facility Number 00154

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FORSYTH CARE CENTER			
477 COY BLVD		<b>Telephone</b> (417) 546-6337	Alzheimer's Unit No
FORSYTH	MO 65653-5132	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 640		County TANEY	DMH Licensed No
FORSYTH	MO 65653-0640	Region 1 Medicare/Medicaid	Facility Number 18870
		9	
FOUNTAINBLEAU LODGE			
2001 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: SNF	Bed Capacity 33
Mailing Address 2001 NORTH KINGS		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2 Medicare/Medicaid	Facility Number 12751
CAI E GIRARDEAU	WO 03701-2173	Region 2 Medicare/Medicaid	racinty Number 12731
EQUINTAINDI EALLI ODCE			
FOUNTAINBLEAU LODGE 2001 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 335-1999	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: ALF	Bed Capacity 56
Mailing Address 2001 NORTH KINGS		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-2193	Region 2	
CAPE GIRARDEAU	MO 03/01-2193	Region 2	Facility Number 12751
FOUNTAINBLEAU NURSING CENT	TED		
1349 HIGHWAY 61	LEK	<b>Telephone</b> (636) 937-3500	Alzheimer's Unit No
FESTUS	MO 63028-4107	Level of Care: SNF	Bed Capacity 106
Mailing Address PO BOX 700	MO 03020-4107	County JEFFERSON	DMH Licensed No
FESTUS	MO 63028-0700	Region 2 Medicare/Medicaid	Facility Number 17080
113103	MO 03020-0700	Region 2 Medicare/Medicald	racinty Number 17080
FOUNTAINS OF WEST COUNTY AI	L, LLC THE		
15822 CLAYTON RD	, -	<b>Telephone</b> (636) 220-1660	Alzheimer's Unit Yes
ELLISVILLE	MO 63011-2240	Level of Care: ALF**	<b>Bed Capacity</b> 80
Mailing Address 15822 CLAYTON RD	)	County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63011-2240	Region 7	Facility Number 29435
FOUR SEASONS ASSISTED LIVING	<del>}</del>		
230 RAILROAD ST		<b>Telephone</b> (636) 366-4231	Alzheimer's Unit No
MOSCOW MILLS	MO 63362-1600	Level of Care: ALF	<b>Bed Capacity</b> 30
Mailing Address 230 RAILROAD ST		County LINCOLN	<b>DMH Licensed</b> Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number 02624
EOLID GEAGONG LIMING ODNINGS			
FOUR SEASONS LIVING CENTER		m 1 1 (650) 005 0000	
2800 HIGHWAY TT	MO (5201 1410	<b>Telephone</b> (660) 826-8803	Alzheimer's Unit Yes
SEDALIA	MO 65301-1410	Level of Care: SNF	Bed Capacity 239
Mailing Address 2800 HIGHWAY TT	MO 25004 4440	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-1410	Region 6 Medicare/Medicaid	Facility Number 00836
FOUR SEASONS RCF I			
220 RAILROAD ST		<b>Telephone</b> (636) 366-4231	Alzheimer's Unit No
MOSCOW MILLS	MO 63362-1600	Level of Care: RCF	Bed Capacity 23
Mailing Address 230 RAILROAD ST	110 00002 1000	County LINCOLN	DMH Licensed Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number 02624
		Acgion -	2.30110, 1.4111001 02024

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FOXBERRY TERRACE - ASSISTED	LIVING BY AMERICARE			
4316 NORTH ST LOUIS AVE		<b>Telephone</b> (417) 625-1000	Alzheimer's Unit	Yes
WEBB CITY	MO 64870-9550	Level of Care: ALF**	Bed Capacity	46
Mailing Address 4316 NORTH ST LO	UIS AVE	County JASPER	DMH Licensed	No
WEBB CITY	MO 64870-9550	Region 1	Facility Number	25428
FOXWOOD SPRINGS LIVING CEN	TER			
1500 WEST FOXWOOD DR	TEN.	<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	No
RAYMORE	MO 64083-9347	Level of Care: ALF**	Bed Capacity	62
Mailing Address 1500 WEST FOXWO		County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	Region 3	Facility Number	02649
		region 5	Tuesting Training	02019
FOXWOOD SPRINGS LIVING CEN	TER			
1500 WEST FOXWOOD DR		<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	Yes
RAYMORE	MO 64083-9347	Level of Care: SNF	Bed Capacity	108
Mailing Address 1500 WEST FOXWO		County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	Region 3 Medicare/Medicaid	Facility Number	02649
FREDERICK STREET MANOR				
429 NORTH FREDERICK STREET		<b>Telephone</b> (573) 334-2662	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4834	Level of Care: RCF*	Bed Capacity	32
Mailing Address 429 NORTH FREDE	RICK STREET	<b>County</b> CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-4834	Region 2	Facility Number	02662
FREMONT SENIOR LIVING, THE				
1520 EAST BATES ST		<b>Telephone</b> (417) 881-0500	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65804-8401	Level of Care: ALF**	Bed Capacity	72
Mailing Address 1520 EAST BATES S	ST	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65804-8401	Region 1	Facility Number	28782
	I WING & MEMORY GARE			
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE	T. I. I. (62.6) 7.22 0.100		MEG
15250 VILLAGE VIEW DRIVE	MO (2015 1002	<b>Telephone</b> (636) 733-0199	Alzheimer's Unit	YES
CHESTERFIELD	MO 63017-1982	Level of Care: ALF**	Bed Capacity	66
Mailing Address 15250 VILLAGE VIE		County SAINT LOUIS COUNTY	DMH Licensed	Yes
CHESTERFIELD	MO 63017-1982	Region 7	Facility Number	02715
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE			
12777 POINTE DR		<b>Telephone</b> (314) 270-7111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63127-1757	Level of Care: ALF**	<b>Bed Capacity</b>	84
Mailing Address 12777 POINTE DR		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1757	Region 7	Facility Number	02703
FRIENDSHIP VILLAGE CHESTER	FIELD			
15250 VILLAGE VIEW DRIVE		<b>Telephone</b> (636) 733-0199	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-1982	Level of Care: SNF	Bed Capacity	90
Mailing Address 15250 VILLAGE VIE		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-1982	Region 7 Medicare/Medicaid	Facility Number	02715

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FRIENDSHIP VILLAGE SUNSET HIL	LS			
12651 VILLAGE CIRCLE DR		<b>Telephone</b> (314) 270-7777	Alzheimer's Unit	No
	MO 63127-1778	Level of Care: SNF	Bed Capacity	144
Mailing Address 12651 VILLAGE CIRCI		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1778	Region 7 Medicare/Medicaid	Facility Number	02703
FRONTIER HEALTH & REHABILITA	ATION			
2840 WEST CLAY ST		<b>Telephone</b> (636) 946-6100	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2536	Level of Care: SNF	Bed Capacity	180
Mailing Address 2840 WEST CLAY ST		County SAINT CHARLES	DMH Licensed	No
_	MO 63301-2536	Region 5 Medicare/Medicaid	Facility Number	01521
THE TON MANOR CARE CENTER				
FULTON MANOR CARE CENTER		T-11 (572) (42 (924	A 1_1, _: T;	NI-
520 MANOR DR FULTON	MO 65251 2420	Telephone (573) 642-6834 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 52
	MO 65251-2429		DMH Licensed	No
Mailing Address 520 MANOR DR FULTON	MO 65251 2420	•		
FULION	MO 65251-2429	Region 6 Medicare/Medicaid	racinty Number	02725
FULTON NURSING & REHAB				
1510 BLUFF ST		<b>Telephone</b> (573) 642-0202	Alzheimer's Unit	Yes
FULTON	MO 65251-2345	Level of Care: SNF	Bed Capacity	100
Mailing Address 1510 BLUFF ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2345	Region 6 Medicare/Medicaid	Facility Number	03492
GABLES AT BRADY CIRCLE, LLC T	THE			
11 BRADY CIRCLE	HE.	<b>Telephone</b> (314) 890-2230	Alzheimer's Unit	No
	MO 63114-1110	Level of Care: ALF**	Bed Capacity	32
Mailing Address 11 BRADY CIRCLE	WIO 03114-1110	County SAINT LOUIS COUNTY	DMH Licensed	No
	MO 63114-1110	Region 7		30048
SARVI LOOKS	MO 03114 1110	Region /	Tacinty Number	30046
GAINESVILLE HEALTH CARE CENT	TER			
77 MEDICAL DR		<b>Telephone</b> (417) 679-4921	Alzheimer's Unit	No
GAINESVILLE	MO 65655-0628	Level of Care: SNF	Bed Capacity	99
Mailing Address PO BOX 628		County OZARK	DMH Licensed	No
GAINESVILLE 1	MO 65655-0628	Region 1 Medicare/Medicaid	Facility Number	12868
GARDEN PLAZA OF FLORISSANT				
1101 GARDEN PLAZA DR		<b>Telephone</b> (314) 831-0988	Alzheimer's Unit	Yes
FLORISSANT	MO 63033-2269	Level of Care: ALF**	Bed Capacity	102
Mailing Address 1101 GARDEN PLAZA		County SAINT LOUIS COUNTY	DMH Licensed	No
_	MO 63033-2269	Region 7	Facility Number	27826
CADDEN VIEW CADE CENTED				
GARDEN VIEW CARE CENTER 700 GARDEN PATH		<b>Telephone</b> (636) 240-2840	Alzheimer's Unit	Yes
	MO 63366-3052	Level of Care: SNF	Bed Capacity	120
Mailing Address 700 GARDEN PATH	03300 3032	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-3052	Region 5 Medicare/Medicaid		13963

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GARDEN VIEW CARE CENTER A	T DOUGHERTY FERRY			
13612 BIG BEND RD		<b>Telephone</b> (636) 861-0500	Alzheimer's Unit	Yes
VALLEY PARK	MO 63088-1447	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 13612 BIG BEND R	D	County SAINT LOUIS COUNTY	DMH Licensed	No
VALLEY PARK	MO 63088-1447	Region 7 Medicare/Medicaid	Facility Number	23101
GARDEN VIEW CARE CENTER O	TE CHECTEDEIEI D			
1025 CHESTERFIELD POINTE PRKV		<b>Telephone</b> (636) 537-3333	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-1957	Level of Care: SNF	Bed Capacity	130
Mailing Address 1025 CHESTERFIE			DMH Licensed	No
CHESTERFIELD	MO 63017-1957			
CHESTERFIELD	WIO 03017-1937	Region 7 Medicare/Medicaid	Facility Number	16409
GARDEN VILLAS				
13590 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 434-2520	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-5823	Level of Care: ALF**	Bed Capacity	46
Mailing Address 13590 SOUTH OUT		County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-5823	Region 7	Facility Number	28978
GARDEN VILLAS NORTH				
4505 PARKER ROAD		<b>Telephone</b> (314) 355-6100	Alzheimer's Unit	No
BLACK JACK	MO 63033-4268	Level of Care: ALF**	<b>Bed Capacity</b>	90
Mailing Address 4505 PARKER RD		County SAINT LOUIS COUNTY	DMH Licensed	No
BLACK JACK	MO 63033-4268	Region 7	Facility Number	28930
GARDEN VILLAS OF O'FALLON				
7092 SOUTH OUTER 364 ROAD		<b>Telephone</b> (636) 240-5560	Alzheimer's Unit	No
O'FALLON	MO 63368-7757	Level of Care: ALF	Bed Capacity	95
Mailing Address 7092 SOUTH OUTE		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-7757	Region 5	Facility Number	27793
011 <u>2</u> 291,	1120 02000 1727	Region 5	Tuestoy I (units of	21173
GARDEN VILLAS SOUTH		T		
13457 TESSON FERRY RD	110 (212) (212)	<b>Telephone</b> (314) 843-7788	Alzheimer's Unit	No
SAINT LOUIS	MO 63128-4010	Level of Care: ALF	Bed Capacity	83
Mailing Address 13457 TESSON FER		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4010	Region 7	Facility Number	28964
GARDENS AT BARRY ROAD, THI	Ε			
8300 NW BARRY RD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	Yes
KANSAS CITY	MO 64153-1634	Level of Care: ALF**	<b>Bed Capacity</b>	40
Mailing Address 8300 NW BARRY F	RD	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number	23774
GARDENS AT BARRY ROAD, THI	Ε			
8300 NW BARRY ROAD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	No
KANSAS CITY	MO 64153-1634	Level of Care: ALF	<b>Bed Capacity</b>	100
Mailing Address 8300 NW BARRY F	RD	<b>County</b> PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number	23774

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GARDENS, THE				
1302 WEST SUNSET		<b>Telephone</b> (417) 889-7600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-5943	<b>Level of Care:</b> ALF**	Bed Capacity	148
Mailing Address 1302 WEST SUNSET		<b>County</b> GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5943	Region 1	Facility Number	20288
GASCONADE MANOR NURSING H	OME			
1910 NURSING HOME RD	OME	<b>Telephone</b> (573) 437-4101	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care: SNF	Bed Capacity	79
Mailing Address PO BOX 520		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6 Medicare/Medicaid	Facility Number	02804
			•	
CASCONARE WERRASE OF REWINDIN	CAME OF MEETING			
GASCONADE TERRACE RETIREM	ENT CENTER	TO 1 1 (572) 427 4922	A11	NT
1930 NURSING HOME RD	MO 65066 2944	<b>Telephone</b> (573) 437-4833	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care: ALF	Bed Capacity	19
Mailing Address PO BOX 520	MO (50() 0520	County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6	Facility Number	14143
GENERAL BAPTIST NURSING HO	ME			
17108 US HIGHWAY 62		<b>Telephone</b> (573) 246-2155	Alzheimer's Unit	Yes
CAMPBELL	MO 63933-6383	Level of Care: SNF	Bed Capacity	90
Mailing Address 17108 US HWY 62	1.0 (2000 (200	County DUNKLIN	DMH Licensed	No
CAMPBELL	MO 63933-6383	Region 2 Medicare/Medicaid	Facility Number	02820
GEORGIA BROWN BLOSSER HOM	E FOR THE AGED			
1210 EAST EASTWOOD ST		<b>Telephone</b> (660) 886-5022	Alzheimer's Unit	No
1210 EAST EASTWOOD ST MARSHALL	MO 65340-1510	Level of Care: RCF	Bed Capacity	11
1210 EAST EASTWOOD ST MARSHALL <b>Mailing Address</b> 1210 EAST EASTWO	MO 65340-1510 OOD ST	Level of Care: RCF County SALINE	Bed Capacity DMH Licensed	11 No
1210 EAST EASTWOOD ST MARSHALL	MO 65340-1510	Level of Care: RCF	Bed Capacity	11
1210 EAST EASTWOOD ST MARSHALL <b>Mailing Address</b> 1210 EAST EASTWO MARSHALL	MO 65340-1510 OOD ST MO 65340-1510	Level of Care: RCF County SALINE	Bed Capacity DMH Licensed	11 No
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL GEORGIAN GARDENS CENTER FO	MO 65340-1510 OOD ST MO 65340-1510	Level of Care: RCF County SALINE Region 5	Bed Capacity DMH Licensed Facility Number	11 No 00633
1210 EAST EASTWOOD ST  MARSHALL  Mailing Address 1210 EAST EASTWO  MARSHALL  GEORGIAN GARDENS CENTER FO  1 GEORGIAN GARDENS DR	MO 65340-1510 DOD ST MO 65340-1510 OR REHAB AND HEALTHCARE	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	11 No 00633 Yes
1210 EAST EASTWOOD ST  MARSHALL  Mailing Address 1210 EAST EASTWO  MARSHALL  GEORGIAN GARDENS CENTER FO  1 GEORGIAN GARDENS DR  POTOSI	MO 65340-1510 DOD ST  MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	11 No 00633 Yes 120
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI Mailing Address 1 GEORGIAN GARD	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	11 No 00633 Yes 120 No
1210 EAST EASTWOOD ST  MARSHALL  Mailing Address 1210 EAST EASTWO  MARSHALL  GEORGIAN GARDENS CENTER FO  1 GEORGIAN GARDENS DR  POTOSI	MO 65340-1510 DOD ST  MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	11 No 00633 Yes 120
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI Mailing Address 1 GEORGIAN GARD POTOSI	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	11 No 00633 Yes 120 No
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI Mailing Address 1 GEORGIAN GARD POTOSI GIDEON CARE CENTER	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI Mailing Address 1 GEORGIAN GARD POTOSI GIDEON CARE CENTER 300 LUNBECK	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	11 No 00633 Yes 120 No 02830
1210 EAST EASTWOOD ST MARSHALL Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON Mailing Address PO BOX 197	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	11 No 00633 Yes 120 No 02830 YES 72 No
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	11 No 00633 Yes 120 No 02830
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON  Mailing Address PO BOX 197 GIDEON	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	11 No 00633 Yes 120 No 02830 YES 72 No
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON Mailing Address PO BOX 197 GIDEON  GLASGOW GARDENS	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830 YES 72 No 15538
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON  Mailing Address PO BOX 197 GIDEON  GLASGOW GARDENS 100 AUDSLEY DR	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211 MO 63848-0197	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (660) 338-2297	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830 YES 72 No 15538
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON  Mailing Address PO BOX 197 GIDEON  GLASGOW GARDENS 100 AUDSLEY DR GLASGOW	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (660) 338-2297 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830 YES 72 No 15538
1210 EAST EASTWOOD ST MARSHALL  Mailing Address 1210 EAST EASTWO MARSHALL  GEORGIAN GARDENS CENTER FO 1 GEORGIAN GARDENS DR POTOSI  Mailing Address 1 GEORGIAN GARD POTOSI  GIDEON CARE CENTER 300 LUNBECK GIDEON  Mailing Address PO BOX 197 GIDEON  GLASGOW GARDENS 100 AUDSLEY DR	MO 65340-1510 DOD ST MO 65340-1510  OR REHAB AND HEALTHCARE  MO 63664-1436 ENS DR MO 63664-1436  MO 63848-9211 MO 63848-0197	Level of Care: RCF County SALINE Region 5  Telephone (573) 438-6261 Level of Care: SNF County WASHINGTON Region 2 Medicare/Medicaid  Telephone (573) 448-3505 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (660) 338-2297	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	11 No 00633 Yes 120 No 02830 YES 72 No 15538

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GLENDALE GARDENS NURSING & REH.	AB		
3535 EAST CHEROKEE		<b>Telephone</b> (417) 889-9955	Alzheimer's Unit No
SPRINGFIELD MO	65809-2829	Level of Care: SNF	Bed Capacity 120
Mailing Address 3535 EAST CHEROKEE		County GREENE	DMH Licensed No
SPRINGFIELD MO	65809-2829	Region 1 Medicare/Medicaid	Facility Number 16735
GLENFIELD MEMORY CARE			
118 OHMES ROAD		<b>Telephone</b> (636) 447-4440	Alzheimer's Unit Yes
COTTLEVILLE MO	63376-7649	Level of Care: ALF**	Bed Capacity 12
Mailing Address 118 OHMES RD		County SAINT CHARLES	DMH Licensed No
	63376-7649	Region 5	Facility Number 30372
Mo Mo	03370 7019	Region 5	Taciney Number 50372
GLENWOOD HEALTHCARE			
851 THOROUGHFARE		<b>Telephone</b> (417) 935-2992	Alzheimer's Unit Yes
	65746-8767	Level of Care: SNF	Bed Capacity 60
	03/40-8/0/		- · ·
Mailing Address 851 THOROUGHFARE	657.46 07.67	County WEBSTER	DMH Licensed No
SEYMOUR MO	65746-8767	Region 1 Medicare/Medicaid	Facility Number 16944
GOGGIN BOARDING HOME LLC			
620 COUNTY ROAD 40		<b>Telephone</b> (573) 697-5894	Alzheimer's Unit No
	63631-9133	• '	
	03031-9133		
Mailing Address 620 COUNTY RD 40	50 504 5400	County IRON	DMH Licensed Yes
CALEDONIA MO	63631-9133	Region 2	Facility Number 02937
GOLDEN AGE LIVING CENTER			
404 E THIRD ST		<b>Telephone</b> (573) 377-4521	Alzheimer's Unit Yes
	65078-0947	Level of Care: SNF	Bed Capacity 61
Mailing Address PO BOX 307	03070 0747	County MORGAN	DMH Licensed No
	65078-0307	•	
STOVER MO	030/8-030/	Region 6 Medicare/Medicaid	Facility Number 02949
GOLDEN AGE NURSING HOME			
12498 SE HWY 116		<b>Telephone</b> (660) 645-2243	Alzheimer's Unit No
	64624-9107	Level of Care: SNF	Bed Capacity 83
Mailing Address 12498 SE HWY 116	01021 9107	County CALDWELL	DMH Licensed No
	64624-9107		Facility Number 02957
BRATMER	04024-9107	Region 4 Medicare/Medicaid	Facility Number 02937
GOLDEN ESTATE RESIDENTIAL CARE			
1134 WEST NORTON RD		<b>Telephone</b> (417) 833-4440	Alzheimer's Unit No
	65803-1070	Level of Care: RCF*	Bed Capacity 31
Mailing Address 1134 WEST NORTON RD		County GREENE	DMH Licensed Yes
•	65803-1070	Region 1	Facility Number 02984
DI KINOI ILLD MO	02002-1070	region i	Lacinty Number 02904
GOLDEN OAKS, LLC			
27882 HIGHWAY H		<b>Telephone</b> (660) 886-6172	Alzheimer's Unit No
	65340-5303	Level of Care: ALF**	<b>Bed Capacity</b> 67
Mailing Address 27882 HIGHWAY H		County SALINE	DMH Licensed No
	65340-5303	Region 5	Facility Number 15380
1110		11081011	

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GOLDEN YEARS CENTER FOR RE	HAB AND HEALTHCARE		
2001 JEFFERSON PARKWAY		<b>Telephone</b> (816) 380-4731	Alzheimer's Unit Yes
HARRISONVILLE	MO 64701-3714	Level of Care: SNF	<b>Bed Capacity</b> 128
Mailing Address 2001 JEFFERSON PA	ARKWAY	County CASS	<b>DMH Licensed</b> No
HARRISONVILLE	MO 64701-3714	Region 3 Medicare/Medicaid	Facility Number 12458
GOOD SAMARITAN CARE CENTE	R		
403 WEST MAIN ST		<b>Telephone</b> (660) 668-4515	Alzheimer's Unit No
COLE CAMP	MO 65325-1144	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 403 WEST MAIN ST		County BENTON	<b>DMH Licensed</b> No
COLE CAMP	MO 65325-1144	Region 6 Medicare/Medicaid	Facility Number 03039
GOOD SHEPHERD CARE CENTER 1101 WEST CLAY RD		<b>Telephone</b> (573) 378-5411	Alzheimer's Unit No
VERSAILLES	MO 65084-1177	Level of Care: SNF	Bed Capacity 120
Mailing Address 1101 WEST CLAY R		County MORGAN	DMH Licensed No
VERSAILLES	MO 65084-1177	·	Facility Number 21631
VERSAILLES	WO 03004-1177	Region 6 Medicare/Medicaid	racinty Number 21031
GOOD SHEPHERD COMMUNITY O	CARE AND REHABILITATION		
200 WEST 12TH ST	22-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	<b>Telephone</b> (417) 232-4571	Alzheimer's Unit Yes
LOCKWOOD	MO 65682-8337	Level of Care: SNF	Bed Capacity 69
Mailing Address 200 WEST 12TH ST		County DADE	DMH Licensed No
LOCKWOOD	MO 65682-8337	Region 1 Medicare/Medicaid	Facility Number 03051
		incured to incure in the incur in the inc	- 33 -
GOOD SHEPHERD RESIDENTIAL	CARE FACILITY		
200 WEST 12TH		<b>Telephone</b> (417) 232-4571	Alzheimer's Unit No
LOCKWOOD	MO 65682-8337	Level of Care: RCF*	<b>Bed Capacity</b> 20
Mailing Address 200 WEST 12TH		County DADE	DMH Licensed No
LOCKWOOD	MO 65682-8337	Region 1	Facility Number 03051
GOWER CONVALESCENT CENTER	R, INC	T-11 (916) 424 6492	A1-1
323 SOUTH HIGHWAY 169	MO (4454 0116	<b>Telephone</b> (816) 424-6483	Alzheimer's Unit No
GOWER	MO 64454-9116	Level of Care: SNF	Bed Capacity 82
Mailing Address PO BOX 170	MO (4454 0170	County CLINTON	DMH Licensed No
GOWER	MO 64454-0170	Region 4 Medicare/Medicaid	Facility Number 03107
GRAN VILLAS NEOSHO			
420 LYON DR		<b>Telephone</b> (417) 451-7071	Alzheimer's Unit No
NEOSHO	MO 64850-9194	Level of Care: RCF	<b>Bed Capacity</b> 30
Mailing Address 420 LYON DR		County NEWTON	DMH Licensed No
NEOSHO	MO 64850-9194	Region 1	Facility Number 20156
		-	•
GRANBY HOUSE			
301 SOUTH MAIN		<b>Telephone</b> (417) 472-6271	Alzheimer's Unit No
GRANBY	MO 64844-8336	Level of Care: SNF	Bed Capacity 60
Mailing Address 301 SOUTH MAIN		County NEWTON	DMH Licensed No
GRANBY	MO 64844-8336	Region 1 Medicare/Medicaid	Facility Number 16481

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GRAND MANOR NURSING & REH	ABILITATION CENTER			
3645 COOK AVE		<b>Telephone</b> (314) 531-2352	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-3801	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 3645 COOK AVE		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63113-3801	Region 7 Medicare/Medicaid	Facility Number	13324
GRAND RIVER HEALTH CARE				
118 TRENTON RD		<b>Telephone</b> (660) 646-0353	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-4002	Level of Care: SNF	Bed Capacity	60
Mailing Address 118 TRENTON RD	WO 04001-4002	County LIVINGSTON	DMH Licensed	No
CHILLICOTHE	MO 64601-4002		Facility Number	
CHILLICOTHE	WO 04001-4002	Region 4 Medicare/Medicaid	Facility Number	16939
GRAND ROYALE, THE				
2900 NE KENDALLWOOD PKWY		<b>Telephone</b> (816) 280-4280	Alzheimer's Unit	NO
GLADSTONE	MO 64119-1831	Level of Care: ALF**	Bed Capacity	25
Mailing Address 2900 NE KENDALL		County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4	Facility Number	03086
GRAND ROYALE, THE				
2900 NE KENDALLWOOD PKWY		<b>Telephone</b> (816) 280-4280	Alzheimer's Unit	No
GLADSTONE	MO 64119-1831	Level of Care: SNF	Bed Capacity	45
Mailing Address 2900 NE KENDALL	WOOD PKWY	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4 Medicare/Medicaid	Facility Number	03086
~				
GRANDE AT CREVE COEUR THE				
450 NORTH LINDBERGH BLVD	NO 10111 FOLL	<b>Telephone</b> (314) 628-0004	Alzheimer's Unit	Yes
CREVE COEUR	MO 63141-7814	Level of Care: ALF**	<b>Bed Capacity</b>	58
CREVE COEUR  Mailing Address 450 NORTH LINDB	ERGH BLVD	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	58 No
CREVE COEUR		Level of Care: ALF**	<b>Bed Capacity</b>	58
CREVE COEUR  Mailing Address 450 NORTH LINDB	ERGH BLVD	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	58 No
CREVE COEUR  Mailing Address 450 NORTH LINDB	ERGH BLVD MO 63141-7814	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	58 No
CREVE COEUR  Mailing Address 450 NORTH LINDB  CREVE COEUR	ERGH BLVD MO 63141-7814	Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	58 No
CREVE COEUR  Mailing Address 450 NORTH LINDB  CREVE COEUR  GRANDE AT LAUMEIER PARK TI	ERGH BLVD MO 63141-7814	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number	58 No 30479
CREVE COEUR  Mailing Address 450 NORTH LINDB  CREVE COEUR  GRANDE AT LAUMEIER PARK TI  12470 ROTT ROAD	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	58 No 30479 Yes
CREVE COEUR  Mailing Address 450 NORTH LINDB  CREVE COEUR  GRANDE AT LAUMEIER PARK TI  12470 ROTT ROAD  SUNSET HILLS	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	58 No 30479 Yes 98
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	58 No 30479 Yes 98 No
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	58 No 30479 Yes 98 No
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	58 No 30479 Yes 98 No 30466
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	58 No 30479 Yes 98 No 30466
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE WASHINGTON	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	58 No 30479 Yes 98 No 30466
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE WASHINGTON  GRANITE HOUSE RCF LLC	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466 No 102 No 15045
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE WASHINGTON  GRANITE HOUSE RCF LLC 321 SOUTH MAIN ST	ERGH BLVD MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 546-7283	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466 No 102 No 15045
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE WASHINGTON  GRANITE HOUSE RCF LLC 321 SOUTH MAIN ST IRONTON	ERGH BLVD  MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 546-7283 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466 No 102 No 15045
CREVE COEUR  Mailing Address 450 NORTH LINDB CREVE COEUR  GRANDE AT LAUMEIER PARK TI 12470 ROTT ROAD SUNSET HILLS  Mailing Address 12470 ROTT ROAD SUNSET HILLS  GRANDVIEW HEALTHCARE CEN 201 GRAND AVE WASHINGTON  Mailing Address 201 GRAND AVE WASHINGTON  GRANITE HOUSE RCF LLC 321 SOUTH MAIN ST	ERGH BLVD MO 63141-7814  HE  MO 63127-1247  MO 63127-1247  TTER  MO 63090-1209  MO 63090-1209	Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (314) 462-0222 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7  Telephone (636) 239-9190 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 546-7283	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	58 No 30479 Yes 98 No 30466 No 102 No 15045

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GREEN ACRES RESIDENTIAL CAI	RE FACILITY, LLC			
3688 SAND CREEK ROAD		<b>Telephone</b> (573) 756-2917	Alzheimer's Unit	No
FARMINGTON	MO 63640-7350	Level of Care: RCF	<b>Bed Capacity</b>	12
Mailing Address 3688 SAND CREEK	RD	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-7350	Region 2	<b>Facility Number</b>	17289
CDEEN DADE SENIOD I IVING CO	MMINITY			
GREEN PARK SENIOR LIVING CO 9350 GREEN PARK ROAD	MIMUNITY	<b>Telephone</b> (314) 845-0900	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63123-7211	Telephone (314) 845-0900 Level of Care: SNF		188
Mailing Address 9350 GREEN PARK			Bed Capacity  DMH Licensed	No
SAINT LOUIS	MO 63123-7211			
SAINI LOUIS	WO 03123-7211	Region 7 Medicare/Medicaid	Facility Number	17565
~				
GREENVILLE HEALTH CARE CEN	NTER	T. I. I. (570) 224 2200		
117 SYCAMORE ST	NO (2014 0000	<b>Telephone</b> (573) 224-3298	Alzheimer's Unit	No
GREENVILLE	MO 63944-0000	Level of Care: SNF	Bed Capacity	60 N
Mailing Address PO BOX 108	150 (0011 0100	County WAYNE	DMH Licensed	No
GREENVILLE	MO 63944-0108	Region 2 Medicare/Medicaid	Facility Number	15550
GREGORY RIDGE HEALTH CARE	CENTER			
7001 CLEVELAND AVE		<b>Telephone</b> (816) 333-0700	Alzheimer's Unit	No
KANSAS CITY	MO 64132-1622	Level of Care: SNF	Bed Capacity	116
Mailing Address 7001 CLEVELAND A		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64132-1622	Region 3 Medicare/Medicaid	Facility Number	04109
HAMPTON HOUSE OF MALDEN, I	NC			
201 NORTH DECATUR		<b>Telephone</b> (573) 276-6054	Alzheimer's Unit	No
MALDEN	MO 63863-2017	Level of Care: RCF*	Bed Capacity	22
Mailing Address 201 N DECATUR	150 (0000 0017	County DUNKLIN	DMH Licensed	Yes
MALDEN	MO 63863-2017	Region 2	Facility Number	03331
WARANDER WOUGE ING				
HARAMBEE HOUSE, INC		T. 1 1 (570) 440 (070		27
703 NORTH EIGHTH ST	150 (500) 151	<b>Telephone</b> (573) 443-6972	Alzheimer's Unit	No
COLUMBIA	MO 65201-4516	Level of Care: RCF*	Bed Capacity	15
Mailing Address 703 NORTH EIGHTH		County BOONE	DMH Licensed	Yes
COLUMBIA	MO 65201-4516	Region 6	Facility Number	17197
HADDOD DI ACE, A DIN				
HARBOR PLACE - LINN		m		NO
24 TRENSHAW TRAIL	150 (5054 2054	<b>Telephone</b> (573) 897-2100	Alzheimer's Unit	NO
LINN	MO 65051-2874	Level of Care: RCF	Bed Capacity	24
Mailing Address 24 TRENSHAW TRA		County OSAGE	DMH Licensed	No
LINN	MO 65051-2874	Region 6	Facility Number	31116
HADMONIA CARDENG AGGGGGG	I IVING BY AMERICA PE			
HARMONY GARDENS - ASSISTED	LIVING BY AMERICARE	Telephone (660) 547 5411	A lash oise!- TT-14	N.T
503 BURKARTH ROAD	MO 64002 2145	<b>Telephone</b> (660) 747-5411	Alzheimer's Unit	No
WARRENSBURG	MO 64093-3145	Level of Care: ALF**	Bed Capacity	44 N-
Mailing Address 503 BURKARTH RD		County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-3145	Region 3	Facility Number	18615

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HAROLD AND LOUISE HEALTHC	ARE CENTER		
135 COMMUNICATION DR		<b>Telephone</b> (573) 221-1189	Alzheimer's Unit No
HANNIBAL	MO 63401-3670	Level of Care: RCF	<b>Bed Capacity</b> 98
Mailing Address 135 COMMUNICAT	ION DR	County MARION	<b>DMH Licensed</b> Yes
HANNIBAL	MO 63401-3670	Region 5	Facility Number 29639
HARRIS HOUSE RESIDENTIAL CA	ARE FACILITY. THE		
3859 EAST 59TH TERRACE		<b>Telephone</b> (816) 599-5230	Alzheimer's Unit No
KANSAS CITY	MO 64130-4410	Level of Care: RCF	Bed Capacity 7
Mailing Address 3859 EAST 59TH TE	RRACE	County JACKSON	DMH Licensed No
KANSAS CITY	MO 64130-4410	Region 3	Facility Number 16225
		Region	10223
HARRIS RESIDENTIAL CARE CEN	TER LLC		
401 SOUTH HENRY		<b>Telephone</b> (573) 756-5376	Alzheimer's Unit No
FARMINGTON	MO 63640-1823	Level of Care: RCF*	Bed Capacity 37
Mailing Address PO BOX 671		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON	MO 63640-0675	Region 2	Facility Number 02256
HARTLAND RESIDENTIAL CARE	CENTER		
23435 LADDER DR		<b>Telephone</b> (660) 886-7093	Alzheimer's Unit No
MARSHALL	MO 65340-4662	Level of Care: RCF	Bed Capacity 12
Mailing Address 23435 LADDER DR		County SALINE	DMH Licensed No
MARSHALL	MO 65340-4662	Region 5	Facility Number 15163
HADEMANN VIII I ACE ACCICEE	NAMEDICA DE		
HARTMANN VILLAGE - ASSISTED	DLIVING BY AMERICARE	Talanhana (660) 992 0022	Alahaiman'a Unit No
615 RANKIN MILL LN	MO (5222 2072	Telephone (660) 882-9933 Level of Care: ALF**	Alzheimer's Unit No
BOONVILLE	MO 65233-2873		Bed Capacity 42  DMH Licensed No
Mailing Address 615 RANKIN MILL I BOONVILLE	MO 65233-2873	·	
BOONVILLE	WIO 03233-2073	Region 6	Facility Number 26026
HARTON SENIOR LIVING			
1054 SOUTH HWY 47		<b>Telephone</b> (636) 377-4444	Alzheimer's Unit No
WARRENTON	MO 63383-2625	Level of Care: RCF	<b>Bed Capacity</b> 36
Mailing Address 1054 SOUTH HWY	17	<b>County</b> WARREN	<b>DMH Licensed</b> No
WARRENTON	MO 63383-2625	Region 6	Facility Number 30144
HARTVILLE CARE CENTER			
649 WEST ROLLA ST		<b>Telephone</b> (417) 741-6192	Alzheimer's Unit No
HARTVILLE	MO 65667-8221	Level of Care: SNF	Bed Capacity 60
Mailing Address 649 WEST ROLLA S		County WRIGHT	DMH Licensed No
HARTVILLE	MO 65667-8221	Region 1 Medicare/Medicaid	Facility Number 17946
	- 0000. OEE1	Angron - Wicuical Chricuitalu	- weining 1/940
HARVESTER RESIDENTIAL CARE			
35 LILLIAN DR		<b>Telephone</b> (636) 939-3833	Alzheimer's Unit No
SAINT CHARLES	MO 63304-7032	Level of Care: RCF*	Bed Capacity 38
Mailing Address 35 LILLIAN DR	150 5000 1 5000	County SAINT CHARLES	DMH Licensed Yes
SAINT CHARLES	MO 63304-7032	Region 5	Facility Number 03411

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HAVEN, THE				
614 SOUTH BY-PASS		<b>Telephone</b> (573) 888-1201		No
KENNETT	MO 63857-3240	Level of Care: RCF*		64
Mailing Address 612 SOUTH BY-PASS		County DUNKLIN		l'es
KENNETT	MO 63857-3240	Region 2	Facility Number 2762	20
HEART OF THE OZARKS HEALTH	CARE CENTER			
2004 CRESTVIEW ST		<b>Telephone</b> (417) 683-4129	Alzheimer's Unit	No
AVA	MO 65608-8903	Level of Care: SNF		20
Mailing Address PO BOX 727		County DOUGLAS	= :	No
AVA	MO 65608-0727	Region 1 Medicare/Medicaid	Facility Number 0129	
		region - Wedlear Coviculation	14011051 012	,,
HEARTLAND CARE AND REHABIL	ITATION CENTER			_
2525 BOUTIN DR		<b>Telephone</b> (573) 334-5225		es
CAPE GIRARDEAU	MO 63701-8551	Level of Care: SNF		02
Mailing Address 2525 BOUTIN DR		County CAPE GIRARDEAU		No
CAPE GIRARDEAU	MO 63701-8551	Region 2 Medicare/Medicaid	Facility Number 0102	23
HEARTLAND II RESIDENTIAL CAR	RE FACILITY, INC			
117 SOUTH 15TH ST		<b>Telephone</b> (816) 676-1506	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-2904	Level of Care: RCF*	Bed Capacity	52
Mailing Address 117 SOUTH 15TH ST		County BUCHANAN	DMH Licensed Y	<i>l</i> es
SAINT JOSEPH	MO 64501-2904	Region 4	Facility Number 1862	20
HEARTLAND III RCF				
1606 SOUTH 38TH ST		<b>Telephone</b> (816) 390-8941	Alzheimer's Unit	No
SAINT JOSEPH	MO 64507-2216	Level of Care: RCF	Bed Capacity	18
Mailing Address PO BOX 8923		County BUCHANAN		Zes .
SAINT JOSEPH	MO 64508-8923	Region 4	Facility Number 0092	20
		5	·	
HEADTIAND DECIDENTIAL CADE	EACH PEV INC			
HEARTLAND RESIDENTIAL CARE 1311 FRANCIS ST	FACILITY, INC	Tolonhone (916) 222 5770	Alabaiman'a Unit	Νīο
SAINT JOSEPH	MO (4501 2219	<b>Telephone</b> (816) 233-5779		No
	MO 64501-2318	Level of Care: RCF		20
Mailing Address 1311 FRANCIS ST	MO (4501 2210	County BUCHANAN		es
SAINT JOSEPH	MO 64501-2318	Region 4	Facility Number 0249	91
HEISINGER BLUFFS HEALTHCAR	E WESTERN CAMPUS			
1306 WEST MAIN ST		<b>Telephone</b> (573) 635-0166	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-1356	Level of Care: SNF	Bed Capacity	69
Mailing Address 1306 WEST MAIN ST		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-1356	Region 6 Medicare/Medicaid	Facility Number 0757	72
HEISINGER BLUFFS REHAB AND H	HEALTHCARE CENTER			
1002 WEST MAIN ST		<b>Telephone</b> (573) 636-6288	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-6901	Level of Care: SNF	Bed Capacity	60
Mailing Address 1002 WEST MAIN ST		County COLE	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

03479

MO 65109-6901

JEFFERSON CITY

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HEISINGER BLUFFS SENIOR LIVING			
1002 WEST MAIN ST	<b>Telephone</b> (573) 636-6288	Alzheimer's Unit	Yes
JEFFERSON CITY MO 65109-6901	Level of Care: ALF**	Bed Capacity	111
Mailing Address 1002 WEST MAIN ST	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-6901	Region 6	Facility Number	03479
HENLEY PLACE OF NEOSHO, A SENIOR RESIDENCE BY AMERICA	RE.		
1105 VILLAGE RD	<b>Telephone</b> (417) 451-1000	Alzheimer's Unit	No
NEOSHO MO 64850-9076	Level of Care: RCF	Bed Capacity	50
Mailing Address 1105 VILLAGE RD	County NEWTON	DMH Licensed	No
NEOSHO MO 64850-9076	Region 1	Facility Number	20193
	Region -	Tuesday Tuesday	20175
HERITAGE CARE CENTER			
4401 NORTH HANLEY RD	<b>Telephone</b> (314) 521-7471	Alzheimer's Unit	No
SAINT LOUIS MO 63134-2710	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 4401 NORTH HANLEY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63134-2710	Region 7 Medicare/Medicaid	Facility Number	00411
HERITAGE HALL NURSING CENTER			
750 EAST HIGHWAY 22	<b>Telephone</b> (573) 682-5551	Alzheimer's Unit	No
CENTRALIA MO 65240-1146	Level of Care: SNF	Bed Capacity	60
Mailing Address 750 EAST HIGHWAY 22	County BOONE	DMH Licensed	No
CENTRALIA MO 65240-1146	Region 6 Medicare/Medicaid	Facility Number	03069
CENTRALIA MO 03240-1140	Region 6 Medicare/Medicaid	racinty Number	03009
HERITAGE HILLS ASSISTED LIVING FACILITY			
HERITAGE HILLS ASSISTED LIVING FACILITY ROUTE 5, BOX 68	<b>Telephone</b> (573) 866-2003	Alzheimer's Unit	No
	Telephone (573) 866-2003 Level of Care: ALF	Alzheimer's Unit Bed Capacity	No 24
ROUTE 5, BOX 68	• '		
ROUTE 5, BOX 68 PATTON MO 63662-9760	Level of Care: ALF	<b>Bed Capacity</b>	24
ROUTE 5, BOX 68 PATTON MO 63662-9760 Mailing Address PO BOX B PATTON MO 63662-0010	Level of Care: ALF County BOLLINGER Region 2	Bed Capacity  DMH Licensed	24 Yes
ROUTE 5, BOX 68 PATTON MO 63662-9760 Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR	Level of Care: ALF County BOLLINGER Region 2	Bed Capacity DMH Licensed Facility Number	24 Yes 18783
ROUTE 5, BOX 68 PATTON MO 63662-9760 Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	24 Yes 18783 No
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568	Level of Care: ALF County BOLLINGER Region 2  E Telephone (573) 888-1044 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	24 Yes 18783 No 72
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR: 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	24 Yes 18783 No 72 No
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568	Level of Care: ALF County BOLLINGER Region 2  E Telephone (573) 888-1044 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	24 Yes 18783 No 72
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	24 Yes 18783 No 72 No
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST	Level of Care: ALF County BOLLINGER Region 2  E Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR: 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR: 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR: 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST GLADSTONE MO 64119-1569	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	24 Yes 18783 No 72 No 17533
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR: 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST GLADSTONE MO 64119-1569  HERITAGE VILLAGE OF PLATTE CITY	Level of Care: ALF County BOLLINGER Region 2  E Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY Region 4	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	24 Yes 18783 No 72 No 17533 No 60 No 12510
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST GLADSTONE MO 64119-1569  HERITAGE VILLAGE OF PLATTE CITY 15 WALLINGFORD DR	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY Region 4  Telephone (816) 858-2182	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	24 Yes 18783 No 72 No 17533 No 60 No 12510
ROUTE 5, BOX 68 PATTON MO 63662-9760  Mailing Address PO BOX B PATTON MO 63662-0010  HERITAGE NURSING CENTER - SKILLED NURSING BY AMERICAR 1802 SAINT FRANCIS ST KENNETT MO 63857-1568  Mailing Address PO BOX 827 KENNETT MO 63857-0827  HERITAGE VILLAGE OF GLADSTONE 3000 NORTH EAST 64TH ST GLADSTONE MO 64119-1569  Mailing Address 3000 NE 64TH ST GLADSTONE MO 64119-1569  HERITAGE VILLAGE OF PLATTE CITY 15 WALLINGFORD DR PLATTE CITY MO 64079-9604	Level of Care: ALF County BOLLINGER Region 2  Telephone (573) 888-1044 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid  Telephone (816) 454-5130 Level of Care: ALF** County CLAY Region 4  Telephone (816) 858-2182 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	24 Yes 18783 No 72 No 17533 No 60 No 12510

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HERMITAGE NURSING & REHAB		<b></b>	
18599 FIRST STREET	MO (75.50 040)	<b>Telephone</b> (417) 745-2111	Alzheimer's Unit Yes
HERMITAGE	MO 65668-9129	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 325	MO (5669 0225	County HICKORY	DMH Licensed No
HERMITAGE	MO 65668-0325	Region 1 Medicare/Medicaid	Facility Number 10240
HICKORY MANOR			
209 HICKORY ST		<b>Telephone</b> (573) 674-2111	Alzheimer's Unit No
LICKING	MO 65542-9847	Level of Care: SNF	Bed Capacity 60
Mailing Address 209 HICKORY ST		County TEXAS	DMH Licensed No
LICKING	MO 65542-9847	Region 1 Medicare/Medicaid	Facility Number 07929
HIDDEN ACRES ASSISTED LIVING	ì		
19235 STATE ROUTE EE		<b>Telephone</b> (573) 756-8141	Alzheimer's Unit No
SAINTE GENEVIEVE	MO 63670-8213	Level of Care: ALF	Bed Capacity 18
Mailing Address 19235 STATE ROUT	E EE	County SAINTE GENEVIEVE	DMH Licensed Yes
SAINTE GENEVIEVE	MO 63670-8213	Region 2	Facility Number 19721
HIDDEN ACRES ASSISTED LIVING	CHIIC		
19235 STATE ROUTE EE	5 II LLC	<b>Telephone</b> (573) 756-8141	Alzheimer's Unit No
SAINTE GENEVIEVE	MO 63670-8213	Level of Care: ALF	Bed Capacity 18
Mailing Address 19235 STATE ROUT		County SAINTE GENEVIEVE	DMH Licensed Yes
SAINTE GENEVIEVE	MO 63670-8213	Region 2	Facility Number 11134
HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR		<b>Telephone</b> (816) 737-1010	Alzheimer's Unit No
RAYTOWN	MO 64133-7409	Level of Care: RCF*	<b>Bed Capacity</b> 48
Mailing Address 11400 HIDDEN LAK		County JACKSON	<b>DMH Licensed</b> No
RAYTOWN	MO 64133-7409	Region 3	Facility Number 17146
HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR		<b>Telephone</b> (816) 737-1010	Alzheimer's Unit No
RAYTOWN	MO 64133-7409	Level of Care: SNF	<b>Bed Capacity</b> 112
Mailing Address 11400 HIDDEN LAK	E DR	<b>County</b> JACKSON	<b>DMH Licensed</b> No
RAYTOWN	MO 64133-7409	Region 3 Medicare/Medicaid	Facility Number 17146
HIGHLAND CREST - ASSISTED LI	VING BY AMERICARE		
2204 S HALLIBURTON ST		<b>Telephone</b> (660) 627-8004	Alzheimer's Unit No
KIRKSVILLE	MO 63501-4651	Level of Care: ALF**	Bed Capacity 42
Mailing Address 2204 S HALLIBURTO	ON ST	County ADAIR	DMH Licensed No
KIRKSVILLE	MO 63501-4651	Region 5	Facility Number 16785
HIGHLAND REHABILITATION &	HEAT TH CADE CENTED		
904 EAST 68TH ST	MEALIN CAME CENTER	<b>Telephone</b> (816) 333-5485	Alzheimer's Unit NO
KANSAS CITY		• '	
	MO 64131-1305	Level of Care: SNF	Bed Capacity 169
Mailing Address 904 EAST 68TH ST	MO 64131-1305	Level of Care: SNF County JACKSON	Bed Capacity 162  DMH Licensed No
Mailing Address 904 EAST 68TH ST KANSAS CITY	MO 64131-1305 MO 64131-1305	County JACKSON  Region 3 Medicare/Medicaid	DMH Licensed No Facility Number 06782

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HILL CREST MANOR		T. I	411	
801 SOUTH COLBY	MO (4644 0207	<b>Telephone</b> (816) 583-2119	Alzheimer's Unit	No
HAMILTON	MO 64644-8287	Level of Care: RCF	Bed Capacity	24 N-
Mailing Address 801 SOUTH COLBY HAMILTON	MO 64644-8287	County CALDWELL	DMH Licensed	No 03315
HAMILTON	MO 04044-8287	Region 4	Facility Number	03315
HILL CREST MANOR				
801 SOUTH COLBY		<b>Telephone</b> (816) 583-2119	Alzheimer's Unit	No
HAMILTON	MO 64644-8287	Level of Care: SNF	Bed Capacity	90
Mailing Address 801 SOUTH COLBY		County CALDWELL	DMH Licensed	No
HAMILTON	MO 64644-8287	Region 4 Medicare/Medicaid	Facility Number	03315
HILLCREST CARE CENTER, INC		T. I. I. (626) 596 2022	A1 1	NT.
1108 CLARKE ST	MO (2000 270)	<b>Telephone</b> (636) 586-3022	Alzheimer's Unit	No
DE SOTO  Molling Address 1109 CLARKE ST	MO 63020-2706	Level of Care: SNF	Bed Capacity DMH Licensed	120
Mailing Address 1108 CLARKE ST	MO 62020 2706	County JEFFERSON		No
DE SOTO	MO 63020-2706	Region 2 Medicare/Medicaid	Facility Number	20084
HILLCREST RESIDENTIAL CARE,	INC			
9415 NORTH BROWN STATION RD		<b>Telephone</b> (573) 696-3201	Alzheimer's Unit	No
COLUMBIA	MO 65202-8671	Level of Care: ALF	<b>Bed Capacity</b>	33
Mailing Address 9415 NORTH BROW	N STATION RD	County BOONE	DMH Licensed	Yes
COLUMBIA	MO 65202-8671	Region 6	Facility Number	03572
HILLSIDE LIVING CENTER				
10160 RESTORATION CIRCLE ROAD	)	<b>Telephone</b> (573) 562-0303	Alzheimer's Unit	No
MINERAL POINT	MO 63660-8538	Level of Care: ALF**	Bed Capacity	60
Mailing Address PO BOX 534		County WASHINGTON	DMH Licensed	Yes
PARK HILLS	MO 63601-0534	Region 2	Facility Number	09270
HILLSIDE REHAB AND HEALTHC	ADE CENTED			
1265 MCLARAN AVE	ARE CENTER	<b>Telephone</b> (314) 388-4121	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63147-1606	Level of Care: SNF	Bed Capacity	208
Mailing Address 1265 MCLARAN AV		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63147-1606	Region 7 Medicare/Medicaid	Facility Number	04687
SAINT EOOLS	WG 03117 1000	Region / Medicare/Medicard	ruemey rumber	04007
HILLTOP AT BLUE RIVER, THE				
10425 CHESTNUT DR		<b>Telephone</b> (816) 763-4444	Alzheimer's Unit	Yes
KANSAS CITY	MO 64137-3201	Level of Care: SNF	Bed Capacity	160
Mailing Address 10425 CHESTNUT D		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64137-3201	Region 3 Medicare/Medicaid	Facility Number	19114
HILLTOP HAVEN RESIDENTIAL (	CARE FACILITY			
18941 CR 305A		<b>Telephone</b> (573) 226-5426	Alzheimer's Unit	No
EMINENCE	MO 65466-9702	Level of Care: RCF	<b>Bed Capacity</b>	20
Mailing Address 18941 CR 305A		County SHANNON	DMH Licensed	Yes
EL CRIENTOE				

**Facility Number** 

03615

MO 65466-9702

**EMINENCE** 

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HOLDEN MANOR CARE CENTER			
2005 SOUTH LEXINGTON	<b>Telephone</b> (816) 732-4138	Alzheimer's Unit	No
HOLDEN MO 64040-1610	Level of Care: SNF	Bed Capacity	52
Mailing Address 2005 SOUTH LEXINGTON	County JOHNSON	DMH Licensed	No
HOLDEN MO 64040-1610	Region 3 Medicare/Medicaid	Facility Number	08334
HOLIDAY RESIDENTIAL CARE			
1019 OLD ST MARY'S RD	<b>Telephone</b> (573) 547-7398	Alzheimer's Unit	No
PERRYVILLE MO 63775-1298	Level of Care: RCF*	Bed Capacity	20
Mailing Address 1019 OLD ST MARY'S RD	County PERRY	DMH Licensed	No.
PERRYVILLE MO 63775-1298	Region 2	Facility Number	19872
TERRIVILLE MO 03/73-1296	Region 2	Facility Number	19872
HOLLY HILLS RETIREMENT HOME			
6421 MINNESOTA	<b>Telephone</b> (314) 351-0767	Alzheimer's Unit	No
SAINT LOUIS MO 63111-2808	Level of Care: RCF*	<b>Bed Capacity</b>	15
Mailing Address 6421 MINNESOTA	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63111-2808	Region 7	Facility Number	03678
HOMESTEAD AT HICKORY VIEW RETIREMENT COMMUNITY, TH	Tr		
1481 MARBACH DRIVE	<b>Telephone</b> (636) 239-1941	Alzheimer's Unit	No
WASHINGTON MO 63090-4636	Level of Care: ALF	Bed Capacity	36
Mailing Address 1481 MARBACH DRIVE	County FRANKLIN	DMH Licensed	No.
WASHINGTON MO 63090-4636	Region 6	Facility Number	32345
WASHINGTON MO 03090-4030	Region 0	Facility Number	32343
HOPE CARE CENTER			
115 EAST 83RD ST	<b>Telephone</b> (816) 523-3988	Alzheimer's Unit	No
KANSAS CITY MO 64114-2537	Level of Care: SNF	Bed Capacity	16
Mailing Address 115 EAST 83RD ST	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64114-2537	Region 3 Medicaid	Facility Number	21370
HOPEDALE COTTAGE ASSISTED LIVING THE			
1314 W SCHOOL STREET	<b>Telephone</b> (417) 581-1308	Alzheimer's Unit	Yes
OZARK MO 65721-6618	Level of Care: ALF**	Bed Capacity	14
Mailing Address 1314 W SCHOOL STREET	County CHRISTIAN	DMH Licensed	No
OZARK MO 65721-6618	Region 1	Facility Number	30302
HOUSE OF CARE CENTER			
3744 BENTON BLVD	<b>Telephone</b> (816) 921-6852	Alzheimer's Unit	No
KANSAS CITY MO 64128-2515	Level of Care: RCF	Bed Capacity	8
Mailing Address 3744 BENTON BLVD	County JACKSON	DMH Licensed	Yes
KANSAS CITY MO 64128-7912	Region 3	Facility Number	17001
141.07.10 CH 1	region 3	racinty rumber	17001
HOUSTON HOUSE			
1000 NORTH INDUSTRIAL DR	<b>Telephone</b> (417) 967-2527	Alzheimer's Unit	No
HOUSTON MO 65483-9400	Level of Care: SNF	Bed Capacity	96
Mailing Address PO BOX 199	County TEXAS	DMH Licensed	No
HOUSTON MO 65483-0199	Region 1 Medicare/Medicaid	Facility Number	10626

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THEROOM TROTICE				
HUDSON HOUSE				
1700-B SOUTH HUDSON AVE		<b>Telephone</b> (417) 678-2169	Alzheimer's Unit	No
AURORA	MO 65605-2717	Level of Care: RCF*	Bed Capacity	41
Mailing Address 1700-B S HUDSON A	VE	County LAWRENCE	DMH Licensed	No
AURORA	MO 65605-2717	Region 1	Facility Number	10444
HUNTER ACRES CARING CENTER				
628 NORTH WEST ST		<b>Telephone</b> (573) 471-7130	Alzheimer's Unit	Yes
SIKESTON	MO 63801-4738	Level of Care: SNF		120
			Bed Capacity DMH Licensed	
Mailing Address 628 NORTH WEST ST		·		No
SIKESTON	MO 63801-4738	Region 2 Medicare/Medicaid	Facility Number	07345
IONITE MEDICAL DECOREDINE	PRINCE			
IGNITE MEDICAL RESORT BLUE S 20511 E TRINITY PLACE	PRINGS	Telephone (916) 622 2000	Alzheimer's Unit	NO
	MO (4015 0501	<b>Telephone</b> (816) 622-2900		
BLUE SPRINGS	MO 64015-9501	Level of Care: SNF	Bed Capacity	90
Mailing Address 20511 E TRINITY PLA		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64015-9501	Region 3 Medicare/Medicaid	Facility Number	32246
IGNITE MEDICAL RESORT CARON	DELET LLC			
621 CARONDELET DR	DELET LLC	<b>Telephone</b> (816) 941-1300	Alzheimer's Unit	No
KANSAS CITY	MO 64114-4670	•		162
			Bed Capacity	
Mailing Address 621 CARONDELET D		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4670	Region 3 Medicare/Medicaid	Facility Number	12185
IGNITE MEDICAL RESORT KANSA	S CITY LLC			
2100 NW BARRY ROAD		<b>Telephone</b> (816) 521-6610	Alzheimer's Unit	No
KANSAS CITY	MO 64154-1000	Level of Care: SNF	Bed Capacity	90
Mailing Address 2100 NW BARRY RO	AD	County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-1000	Region 4 Medicare/Medicaid	Facility Number	31464
IGNITE MEDICAL RESORT ST MAI	RYS LLC			
111 MOCK AVE		<b>Telephone</b> (816) 220-4200	Alzheimer's Unit	Yes
BLUE SPRINGS	MO 64014-2504	Level of Care: SNF	Bed Capacity	130
Mailing Address 111 MOCK AVE		County JACKSON	DMH Licensed	No
Mailing Address 111 MOCK AVE BLUE SPRINGS	MO 64014-2504	County JACKSON Region 3 Medicare/Medicaid	DMH Licensed Facility Number	No 13219
BLUE SPRINGS	MO 64014-2504			
	MO 64014-2504			
BLUE SPRINGS  IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE	MO 64014-2504	Region 3 Medicare/Medicaid  Telephone (816) 220-4200	Facility Number  Alzheimer's Unit	13219 No
BLUE SPRINGS  IGNITE MEDICAL RESORT ST MAI	MO 64014-2504	Region 3 Medicare/Medicaid	Facility Number	13219
BLUE SPRINGS  IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE	MO 64014-2504 RYS LLC	Region 3 Medicare/Medicaid  Telephone (816) 220-4200	Facility Number  Alzheimer's Unit	13219 No
BLUE SPRINGS  IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS	MO 64014-2504 RYS LLC	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF**	Facility Number  Alzheimer's Unit Bed Capacity	13219 No 57
IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS Mailing Address 111 MOCK AVE BLUE SPRINGS	MO 64014-2504  RYS LLC  MO 64014-2504  MO 64014-2504	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF** County JACKSON	Facility Number  Alzheimer's Unit  Bed Capacity  DMH Licensed	No 57 No
IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS Mailing Address 111 MOCK AVE BLUE SPRINGS INDEPENDENCE CARE CENTER OF	MO 64014-2504  RYS LLC  MO 64014-2504  MO 64014-2504	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF** County JACKSON Region 3	Facility Number  Alzheimer's Unit  Bed Capacity  DMH Licensed  Facility Number	No 57 No 13219
IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS Mailing Address 111 MOCK AVE BLUE SPRINGS  INDEPENDENCE CARE CENTER OF 800 SOUTH KINGSHIGHWAY	MO 64014-2504  RYS LLC  MO 64014-2504  MO 64014-2504  F PERRY COUNTY	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF** County JACKSON Region 3  Telephone (573) 547-6546	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 57 No 13219
IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS Mailing Address 111 MOCK AVE BLUE SPRINGS  INDEPENDENCE CARE CENTER OF 800 SOUTH KINGSHIGHWAY PERRYVILLE	MO 64014-2504  RYS LLC  MO 64014-2504  MO 64014-2504  F PERRY COUNTY  MO 63775-2106	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF** County JACKSON Region 3  Telephone (573) 547-6546 Level of Care: SNF	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 57 No 13219  Yes 133
IGNITE MEDICAL RESORT ST MAI 111 MOCK AVE BLUE SPRINGS Mailing Address 111 MOCK AVE BLUE SPRINGS  INDEPENDENCE CARE CENTER OF 800 SOUTH KINGSHIGHWAY	MO 64014-2504  RYS LLC  MO 64014-2504  MO 64014-2504  F PERRY COUNTY  MO 63775-2106	Region 3 Medicare/Medicaid  Telephone (816) 220-4200 Level of Care: ALF** County JACKSON Region 3  Telephone (573) 547-6546	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 57 No 13219

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INDEPENDENCE COURT				
121 INDEPENDENCE DR		<b>Telephone</b> (573) 547-1499	Alzheimer's Unit	No
PERRYVILLE	MO 63775-1496	Level of Care: RCF*	Bed Capacity	75
Mailing Address 121 INDEPENDENCE	E DR	County PERRY	DMH Licensed	No
PERRYVILLE	MO 63775-1496	Region 2	Facility Number	06393
INDEPENDENCE MANOD CADE CE	NATED			
INDEPENDENCE MANOR CARE CE 1600 SOUTH KINGS HIGHWAY	ENTER	<b>Telephone</b> (816) 833-4777	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64055-1853	Level of Care: SNF	Bed Capacity	99
Mailing Address 1600 SOUTH KINGS I		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64055-1853	•	Facility Number	
INDEPENDENCE	WIO 04033-1833	Region 3 Medicare/Medicaid	Facility Number	03807
INDEPENDENCE SQUARE RESIDEN	NTIAL CARE CENTER			
1136 SOUTH MAIN ST		<b>Telephone</b> (573) 547-8600	Alzheimer's Unit	No
PERRYVILLE	MO 63775-8802	Level of Care: RCF*	<b>Bed Capacity</b>	20
Mailing Address 1136 S MAIN ST		County PERRY	DMH Licensed	No
PERRYVILLE	MO 63775-8802	Region 2	Facility Number	14309
J & J RESIDENTIAL CARE FACILIT	rv II			
104 WESBECHER		<b>Telephone</b> (573) 238-1008	Alzheimer's Unit	No
MARBLE HILL	MO 63764-0378	Level of Care: RCF*	Bed Capacity	12
Mailing Address PO BOX 378	110 03704 0370	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-0378	Region 2	Facility Number	07171
WARDEL HILL	WO 03704-0376	Region 2	Pacinty Number	0/1/1
JACKSON MANOR				
710 BROADRIDGE DR		<b>Telephone</b> (573) 243-3101	Alzheimer's Unit	No
JACKSON	MO 63755-3042	Level of Care: SNF	Bed Capacity	90
Mailing Address 710 BROADRIDGE D	R	County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-3042	Region 2 Medicare/Medicaid	Facility Number	03438
JACOBS CARE CENTER, LLC				
932 WEST STATE		<b>Telephone</b> (417) 865-6140	Alzheimer's Unit	No
SPRINGFIELD	MO 65806-2846	Level of Care: RCF	Bed Capacity	12
Mailing Address 932 WEST STATE		County GREENE	DMH Licensed	Yes
SPRINGFIELD	MO 65806-2846	Region 1	Facility Number	06229
JAMES RIVER NURSING AND REHA	ARILITATION			
3550 EAST BATTLEFIELD		<b>Telephone</b> (417) 889-9500	Alzheimer's Unit	No
SPRINGFIELD	MO 65809-3400	Level of Care: SNF	Bed Capacity	120
Mailing Address 3550 EAST BATTLEF		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65809-3400	Region 1 Medicare/Medicaid	Facility Number	17645
		-	•	
JANE HOWELL STUPP APARTMEN	VTS	TI 1 1 (21 t) 200 7100	A1 1	.,
2443 PROUHET AVE	MO (2114 104)	<b>Telephone</b> (314) 890-7100	Alzheimer's Unit	No
OVERLAND	MO 63114-1946	Level of Care: RCF*	Bed Capacity	30 V
Mailing Address 2443 PROUHET AVE		County SAINT LOUIS COUNTY	DMH Licensed	Yes

**Facility Number** 

18369

MO 63114-1946

OVERLAND

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JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
KANSAS CITY	MO 64138-4414	Level of Care: RCF*	Bed Capacity	6
Mailing Address 8745 JAMES A REE	ED RD	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64138-4414	Region 3	Facility Number	12724
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
KANSAS CITY	MO 64138-4414	Level of Care: ICF	Bed Capacity	26
Mailing Address 8745 JAMES A REE		County JACKSON	DMH Licensed	No.
KANSAS CITY	MO 64138-4414	Region 3 Medicaid	Facility Number	12724
Mario eri i	1410 04130 4414	Kegion 5 Wiedicaid	racinty Number	12/24
**************************************				
JEANNE JUGAN CENTER			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
KANSAS CITY	MO 64138-4414	Level of Care: SNF	Bed Capacity	26
Mailing Address 8745 JAMES A REE		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64138-4414	Region 3 Medicaid	Facility Number	12724
JEFFERSON CITY MANOR CARE	CENTER			
1720 VIETH DR		<b>Telephone</b> (573) 635-6193	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2522	Level of Care: SNF	Bed Capacity	102
Mailing Address 1720 VIETH DR		County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-2522	Region 6 Medicare/Medicaid	<b>Facility Number</b>	03870
JEFFERSON CITY NURSING AND	REHABILITATION CENTER, LLC			
	REHABILITATION CENTER, LLC	Telenhone (573) 635-3131	Alzheimer's Unit	Yes
1221 SOUTHGATE LN	,	Telephone (573) 635-3131 Level of Care: SNF	Alzheimer's Unit	Yes 120
1221 SOUTHGATE LN JEFFERSON CITY	MO 65109-2465	Level of Care: SNF	Bed Capacity	120
1221 SOUTHGATE LN JEFFERSON CITY <b>Mailing Address</b> PO BOX 104118	MO 65109-2465	Level of Care: SNF County COLE	Bed Capacity DMH Licensed	120 No
1221 SOUTHGATE LN JEFFERSON CITY	,	Level of Care: SNF	Bed Capacity	120
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY	MO 65109-2465 MO 65110-4118	Level of Care: SNF County COLE	Bed Capacity DMH Licensed	120 No
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE	MO 65109-2465 MO 65110-4118	Level of Care: SNF County COLE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 01865
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 01865
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON	MO 65109-2465  MO 65110-4118  D LIVING BY AMERICARE  MO 64735-2548	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 01865 No 42
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 01865 No 42 No
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON	MO 65109-2465  MO 65110-4118  D LIVING BY AMERICARE  MO 64735-2548	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 01865 No 42
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 01865 No 42 No
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT Mailing Address 615 SW OLDHAM I	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602  PKWY	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT Mailing Address 615 SW OLDHAM I LEE'S SUMMIT	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602  PKWY  MO 64081-2602	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 01865 No 42 No 20603
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT Mailing Address 615 SW OLDHAM I LEE'S SUMMIT	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602  PKWY  MO 64081-2602	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603 No 120 No 04415
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT Mailing Address 615 SW OLDHAM I LEE'S SUMMIT  JOE CLARK RESIDENTIAL CARE 1495 EAST ASHLAND ST	MO 65109-2465 MO 65110-4118  ED LIVING BY AMERICARE MO 64735-2548  S ST MO 64735-2548  MO 64081-2602  PKWY MO 64081-2602  E HOME	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 667-5000	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603 No 120 No 04415
1221 SOUTHGATE LN JEFFERSON CITY  Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON  Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT  Mailing Address 615 SW OLDHAM I LEE'S SUMMIT  JOE CLARK RESIDENTIAL CARE 1495 EAST ASHLAND ST NEVADA	MO 65109-2465  MO 65110-4118  ED LIVING BY AMERICARE  MO 64735-2548  S ST  MO 64735-2548  MO 64081-2602  PKWY  MO 64081-2602	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 667-5000 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603 No 120 No 04415
1221 SOUTHGATE LN JEFFERSON CITY Mailing Address PO BOX 104118 JEFFERSON CITY  JEFFERSON GARDENS - ASSISTE 509 WEST ROGERS ST CLINTON Mailing Address 509 WEST ROGERS CLINTON  JEFFERSON HEALTH CARE 615 SW OLDHAM PARKWAY LEE'S SUMMIT Mailing Address 615 SW OLDHAM I LEE'S SUMMIT  JOE CLARK RESIDENTIAL CARE 1495 EAST ASHLAND ST	MO 65109-2465 MO 65110-4118  ED LIVING BY AMERICARE MO 64735-2548  S ST MO 64735-2548  MO 64081-2602  PKWY MO 64081-2602  E HOME	Level of Care: SNF County COLE Region 6 Medicare/Medicaid  Telephone (660) 885-9770 Level of Care: ALF** County HENRY Region 1  Telephone (816) 524-3328 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 667-5000	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 01865 No 42 No 20603 No 120 No 04415

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JOHN KNOX VILLAGE CARE CEN	NTED		
600 NW PRYOR ROAD	VIEK	<b>Telephone</b> (816) 347-2400	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-1104	Level of Care: SNF	Bed Capacity 430
Mailing Address 600 NW PRYOR RD		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-1104	Region 3 Medicare/Medicaid	Facility Number 14529
LEES SUMMIT	WIO 04081-1104	Region 5 Medicare/Medicaid	racinty Number 14329
JOHNSON COUNTY CARE CENTE	ER.		
122 EAST MARKET ST		<b>Telephone</b> (660) 747-8101	Alzheimer's Unit No
WARRENSBURG	MO 64093-1818	Level of Care: ICF	Bed Capacity 87
Mailing Address 122 EAST MARKET	ST	County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-1818	Region 3 Medicaid	Facility Number 05309
			•
JOLET HOME			
3920 FOREST		<b>Telephone</b> (816) 531-5308	Alzheimer's Unit No
KANSAS CITY	MO 64110-1220	Level of Care: RCF	Bed Capacity 17
Mailing Address 3920 FOREST		County JACKSON	DMH Licensed Yes
KANSAS CITY	MO 64110-1220	Region 3	Facility Number 03982
IONEGI WIII DWOOD GADE CONT	ED		
JONES' WILDWOOD CARE CENT	ER	m	
12806 HWY 151	MO (52/2 2114	<b>Telephone</b> (660) 291-8636	Alzheimer's Unit No
MADISON	MO 65263-3114	Level of Care: RCF	Bed Capacity 32
Mailing Address PO BOX 69	MO (52(2,000)	County MONROE	DMH Licensed Yes
MADISON	MO 65263-0069	Region 5	Facility Number 08573
JOPLIN GARDENS			
2810 SOUTH JACKSON AVE		<b>Telephone</b> (417) 572-0041	Alzheimer's Unit No
JOPLIN	MO 64804-2524	Level of Care: SNF	<b>Bed Capacity</b> 92
Mailing Address 2810 SOUTH JACK	SON AVE	County JASPER	DMH Licensed No
JOPLIN	MO 64804-2524	Region 1 Medicare/Medicaid	Facility Number 01373
JOPLIN HEALTH AND REHABILI	TATION CENTED		
2218 WEST 32ND ST	TATION CENTER	<b>Telephone</b> (417) 623-5264	Alzheimer's Unit Yes
JOPLIN	MO 64804-3514	Level of Care: SNF	Bed Capacity 120
Mailing Address 2218 WEST 32ND S		County NEWTON	DMH Licensed No
JOPLIN	MO 64804-3514	Region 1 Medicare/Medicaid	Facility Number 12583
JOILIN	110 01001 3311	Region 1 Medicare/Medicard	racinty (value)
JORDAN CREEK NURSING & REI	НАВ	TEMPORARY CLO	OSURE - STAFFING
910 SOUTH WEST AVE		<b>Telephone</b> (417) 865-8741	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-4950	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 910 SOUTH WEST	AVE	County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65802-4950	Region 1 Medicare/Medicaid	Facility Number 03245
JOY ADULT CARE CENTER			
614 SOUTH MAIN		<b>Telephone</b> (660) 885-8328	Alzheimer's Unit No
CLINTON	MO 64735-2620	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8		County HENRY	DMH Licensed Yes
CLINTON	MO 64735-0008	Region 1	Facility Number 07268
		<i>a</i> .	•

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TOW A SSISTED A WANG FOR SENIO	nng.		
JOY ASSISTED LIVING FOR SENIO 2030 W MOUNT VERNON ST	JRS	<b>Telephone</b> (417) 864-8805	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4846	Level of Care: ALF	Bed Capacity 74
Mailing Address PO BOX 9655	332 3332 1010	County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65801-9655	Region 1	Facility Number 19668
		8	•
KABUL NURSING HOMES, INC			
1000 MAIN ST		<b>Telephone</b> (417) 962-3713	Alzheimer's Unit No
CABOOL	MO 65689-9125	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address 1000 MAIN ST		County TEXAS	<b>DMH Licensed</b> No
CABOOL	MO 65689-9125	Region 1 Medicare/Medicaid	Facility Number 04085
KASEY PAIGE HEALTH CARE CE	NTER		
3715 JAMIESON AVE		<b>Telephone</b> (314) 781-0222	Alzheimer's Unit No
SAINT LOUIS	MO 63109-1109	Level of Care: RCF	Bed Capacity 111
Mailing Address 3715 JAMIESON AV	E	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63109-1109	Region 7	Facility Number 04650
KATY MANOR			
205 PROSPECT		<b>Telephone</b> (660) 834-3111	Alzheimer's Unit No
PILOT GROVE	MO 65276-1111	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 8	110 03270 1111	County COOPER	DMH Licensed No
PILOT GROVE	MO 65276-0008	Region 6 Medicare/Medicaid	Facility Number 14982
		Treateur of Treateur	11702
KEATON CENTER			
120 N MILL ST		<b>Telephone</b> (636) 232-2323	Alzheimer's Unit No
FESTUS 120 NAME OF	MO 63028-1816	Level of Care: ALF	Bed Capacity 16
Mailing Address 120 N MILL ST	MO (2020 101)	County JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-1816	Region 2	Facility Number 20413
KENDALLWOOD SENIOR LIVING			
2801 NE 60TH ST		<b>Telephone</b> (816) 454-7755	Alzheimer's Unit No
GLADSTONE	MO 64119-2040	Level of Care: RCF	<b>Bed Capacity</b> 100
Mailing Address 2801 NE 60TH ST		County CLAY	<b>DMH Licensed</b> No
GLADSTONE	MO 64119-2040	Region 4	Facility Number 11794
KIDWELL HOME			
1000 KIDWELL DR		<b>Telephone</b> (573) 378-5175	Alzheimer's Unit No
VERSAILLES	MO 65084-1177	Level of Care: RCF*	Bed Capacity 44
Mailing Address 1000 KIDWELL DR		County MORGAN	<b>DMH Licensed</b> No
VERSAILLES	MO 65084-1177	Region 6	Facility Number 21631
KINGDOM CARE SENIOR LIVING	LLC		
811 CENTER ST		<b>Telephone</b> (573) 642-6646	Alzheimer's Unit No
FULTON	MO 65251-1922	Level of Care: ALF	Bed Capacity 41
Mailing Address 811 CENTER ST		County CALLAWAY	<b>DMH Licensed</b> No

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KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST		<b>Telephone</b> (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: SNF	Bed Capacity	36
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6 Medicare/Medicaid	Facility Number	18735
		region s medical contenta		10,00
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: RCF*	Bed Capacity	12
Mailing Address 620 WEST BOULEV	ARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
		region 5	Tuestey Tvalliser	01110
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: ICF	Bed Capacity	36
Mailing Address 620 WEST BOULEV	ARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	<b>Facility Number</b>	04146
KINGSLAND WALK SENIOR LIVIN	NG			
868 KINGSLAND AVENUE		<b>Telephone</b> (314) 955-6884	Alzheimer's Unit	Yes
UNIVERSITY CITY	MO 63130-3181	Level of Care: ALF**	Bed Capacity	70
Mailing Address 868 KINGSLAND AV	/ENUE	County SAINT LOUIS COUNTY	DMH Licensed	No
UNIVERSITY CITY	MO 63130-3181	Region 7	Facility Number	32203
KINGSWOOD		T. 1. 1. (01.0) 040 0004		**
10000 WORNALL RD	NO 64114 4050	<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: ALF**	Bed Capacity	67
Mailing Address 10000 WORNALL RI		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64114-4359	Region 3	Facility Number	04152
KINGSWOOD				
10000 WORNALL RD		<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: SNF	Bed Capacity	86
Mailing Address 10000 WORNALL RI		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4359	Region 3 Medicare/Medicaid	Facility Number	04152
KIRKSVILLE MANOR CARE CENT	TER			
1705 EAST LAHARPE		<b>Telephone</b> (660) 665-3774	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-3927	Level of Care: SNF	Bed Capacity	132
Mailing Address 1705 EAST LAHARP	PE	County ADAIR	DMH Licensed	No
KIRKSVILLE	MO 63501-3927	Region 5 Medicare/Medicaid	Facility Number	04161
KNOX COUNTY NURSING HOME I	NISTRICT			
55774 STATE HIGHWAY 6	DISTRICT	<b>Telephone</b> (660) 397-2282	Alzheimer's Unit	No
EDINA	MO 63537-4253	Level of Care: SNF	Bed Capacity	60
Mailing Address 55774 STATE HIGHV		County KNOX	DMH Licensed	No
Mailing Address 55//4 STATE HIGHV	WAI 0	D. S. M. P. O. C. C.	DMH Licensed	NO 04172

Medicare/Medicaid

**Facility Number** 

04173

MO 63537-4253

**EDINA** 

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LA BELLE MANOR CARE CENTE	R			
1002 CENTRAL		<b>Telephone</b> (660) 213-3234	Alzheimer's Unit	Yes
LA BELLE	MO 63447-2092	Level of Care: SNF	Bed Capacity	94
Mailing Address 1002 CENTRAL		County LEWIS	DMH Licensed	No
LA BELLE	MO 63447-2092	Region 5 Medicare/Medicaid		4212
		region - Medicaro/Medicard	- 11111111	
LA BONNE MAISON-ASSISTED LI	IVING BY AMERICARE			
226 PLAZA DR		<b>Telephone</b> (573) 472-2546	Alzheimer's Unit	No
SIKESTON	MO 63801-5105	Level of Care: ALF**	Bed Capacity	30
Mailing Address 226 PLAZA DR		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-5105	Region 2	Facility Number 28	8804
LA PLATA NURSING HOME 100 OLD STAGECOACH RD		<b>Telephone</b> (660) 332-4315	Alzheimer's Unit	No
LA PLATA	MO 63549-1362	Level of Care: SNF	Bed Capacity	52
Mailing Address 100 OLD STAGECO		County MACON	DMH Licensed	No
LA PLATA	MO 63549-1362	Region 5 Medicare/Medicaid	Facility Number 04	4395
LACLEDE COMMONS 727 S LACLEDE STATION RD SAINT LOUIS	MO 63119-4911	Telephone (314) 968-5570 Level of Care: ALF**	Alzheimer's Unit Bed Capacity	Yes 242
Mailing Address 727 S LACLEDE ST		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63119-4911	Region 7	Facility Number 17	7713
LACOBA HOMES, INC				
850 HIGHWAY 60		<b>Telephone</b> (417) 235-7895	Alzheimer's Unit	No
MONETT	MO 65708-9376	Level of Care: SNF	Bed Capacity	79
Mailing Address PO BOX 885		County BARRY	DMH Licensed	No
MONETT	MO 65708-0885	Region 1 Medicare/Medicaid	Facility Number 04	4315
LAKE GEORGE ASSISTED LIVING	G	T. 1. (770) 110 0777		
5000 E RICHLAND RD	MO (5201 0606	<b>Telephone</b> (573) 442-0577	Alzheimer's Unit	No
COLUMBIA	MO 65201-9606	Level of Care: ALF**	Bed Capacity	10
Mailing Address 5000 EAST RICHLA		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-9606	Region 6	Facility Number 28	8997
LAKE PARKE SENIOR LIVING				
145 4TH ST		<b>Telephone</b> (573) 745-0874	Alzheimer's Unit	No
CAMDENTON	MO 65020-7138	Level of Care: RCF	Bed Capacity	48
Mailing Address 145 4TH ST		County CAMDEN	DMH Licensed	No
CAMDENTON	MO 65020-7138	Region 6	Facility Number 30	0084
LAKE ST CHARLES ASSISTED LI	VING APARTMENTS			
45 HONEY LOCUST LN		<b>Telephone</b> (636) 947-1100	Alzheimer's Unit	No
SAINT CHARLES	MO 63303-5711	Level of Care: ALF	<b>Bed Capacity</b>	50
Mailing Address 45 HONEY LOCUS	ΓLN	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63303-5711	Region 5	Facility Number 18	8030

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I A VIE CERO CIVERON MENA ESTACA DE	TA CHI MIN		
LAKE STOCKTON HEALTHCARE	FACILITY	T. J	
1523 3RD ROAD	110 (55505 0 500	<b>Telephone</b> (417) 276-5126	Alzheimer's Unit Yes
STOCKTON DO DOV. 045	MO 65785-9608	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 945	MO 65505 0045	County CEDAR	DMH Licensed No
STOCKTON	MO 65785-0945	Region 1 Medicare/Medicaid	Facility Number 07680
LAKESHORES RESIDENTIAL CAR	PE FACILITY		
102 SOUTH BOLIVAR RD		<b>Telephone</b> (417) 754-2272	Alzheimer's Unit No
HUMANSVILLE	MO 65674-8553	Level of Care: RCF*	Bed Capacity 30
Mailing Address PO BOX 221	MO 03071 0333	County POLK	DMH Licensed Yes
HUMANSVILLE	MO 65674-0221	Region 1	Facility Number 15309
LAKESIDE MANOR			
810 KENNEDY DRIVE		<b>Telephone</b> (660) 438-8850	Alzheimer's Unit No
WARSAW	MO 65355-3044	Level of Care: RCF*	Bed Capacity 35
Mailing Address PO BOX 280	WO 03333-3044	County BENTON	DMH Licensed Yes
WARSAW	MO 65355-0280	Region 6	Facility Number 05970
WAKSAW	MO 03333-0260	Kegion 0	racinty Number 03970
LAKESIDE MOUNTAIN MANOR			
238 HARMONY HEIGHTS		<b>Telephone</b> (417) 546-5595	Alzheimer's Unit No
FORSYTH	MO 65653-5533	Level of Care: RCF	<b>Bed Capacity</b> 40
Mailing Address 238 HARMONY HE	IGHTS	County TANEY	<b>DMH Licensed</b> Yes
FORSYTH	MO 65653-5533	Region 1	Facility Number 06232
LAKESIDE SUITES		m	
205 TIMBERLINE DR	NO 65220 2005	<b>Telephone</b> (660) 547-3322	Alzheimer's Unit No
LINCOLN	MO 65338-2007	Level of Care: ALF	Bed Capacity 14
Mailing Address 205 TIMBERLINE D		County BENTON	DMH Licensed No
LINCOLN	MO 65338-2007	Region 6	Facility Number 04803
LAKEVIEW HEALTH CARE & RE	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: RCF*	<b>Bed Capacity</b> 17
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6	Facility Number 01602
	MADA MANAGA CENTRE		
LAKEVIEW HEALTH CARE & RE	HABILITATION CENTER	m	
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: SNF	Bed Capacity 60
Mailing Address 1450 ASHLEY RD	MO (5222 2141	County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6 Medicare/Medicaid	Facility Number 01602
LAKEVIEW HEALTH CARE & RE	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: ICF	<b>Bed Capacity</b> 19
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6 Medicaid	Facility Number 01602

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LAKEVIEW POST ACUTE				
1201 GARDEN PLAZA DR		<b>Telephone</b> (314) 831-3752	Alzheimer's Unit N	o
FLORISSANT M	MO 63033-2230	Level of Care: SNF	<b>Bed Capacity</b> 9	00
Mailing Address 1201 GARDEN PLAZA	DR	County SAINT LOUIS COUNTY	DMH Licensed N	o
FLORISSANT M	MO 63033-2230	Region 7 Medicare/Medicaid	Facility Number 2714	6
LAKEWOOD - ASSISTED LIVING BY	AMERICARE			
4685 ROBBERSON AVE	AWERICARE	<b>Telephone</b> (417) 881-1411	Alzheimer's Unit Ye	20
	MO 65810-1785	Level of Care: ALF**		.s 57
Mailing Address 4685 ROBBERSON AVI		County GREENE	DMH Licensed N	
	MO 65810-1785	Region 1		
STRINGI'IEED IV	03810-1783	Region 1	Facility Number 2361	3
LAMPLIGHT VILLAGE		m. 1 (445) 255 2542		
309 LOCUST ST		<b>Telephone</b> (417) 256-2749	Alzheimer's Unit N	
	MO 65775-3906	Level of Care: RCF*		32
Mailing Address PO BOX 166		County HOWELL	DMH Licensed Ye	
WEST PLAINS N	MO 65775-0166	Region 1	Facility Number 2156	3
LANDING OF O'FALLON, THE				
1000 LANDING CIRCLE		<b>Telephone</b> (636) 669-0780	Alzheimer's Unit Ye	es
SAINT CHARLES M	MO 63304-7647	Level of Care: ALF**	Bed Capacity 14	2
Mailing Address 1000 LANDING CIRCLE	E	County SAINT CHARLES	DMH Licensed N	o
SAINT CHARLES M	MO 63304-7647	Region 5	Facility Number 3118	1
LANDMARK VILLA ALF				
1101 OZARK AVE		<b>Telephone</b> (417) 962-3700	Alzheimer's Unit N	o
CABOOL M	MO 65689-7362	Level of Care: ALF	Bed Capacity 4	14
Mailing Address 1101 OZARK AVE		County TEXAS	DMH Licensed Ye	es
CABOOL N	MO 65689-7362	Region 1	Facility Number 0408	5
LANSDOWNE VILLAGE				
4624 LANSDOWNE AVE		<b>Telephone</b> (314) 351-6888	Alzheimer's Unit Ye	èS
SAINT LOUIS N	MO 63116-1523	Level of Care: SNF	Bed Capacity 14	5
Mailing Address 4624 LANSDOWNE AV	E	County SAINT LOUIS CITY	<b>DMH Licensed</b> N	lo
SAINT LOUIS M	MO 63116-1523	Region 7 Medicare/Medicaid	Facility Number 1455	7
LAURIE CARE CENTER				
610 HWY O		<b>Telephone</b> (573) 374-8263	Alzheimer's Unit Ye	es
LAURIE N	MO 65038-1068	Level of Care: SNF	Bed Capacity 10	18
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed N	o
LAURIE N	MO 65038-1068	Region 6 Medicare/Medicaid	Facility Number 0444	.9
LAURIE KNOLLS		m 1 1 (270) 671 671		
610 HIGHWAY O	50 (5000 10 co	<b>Telephone</b> (573) 374-8263	Alzheimer's Unit N	
	MO 65038-1068	Level of Care: RCF*		66
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed N	0

**Facility Number** 

04449

MO 65038-1068

LAURIE

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LAVERNA SENIOR LIVING		(016) 204 2105	AT T. C TT . M	37
904 HALL AVE	MO (4405 1050	<b>Telephone</b> (816) 324-3185	Alzheimer's Unit	Yes
SAVANNAH	MO 64485-1952	Level of Care: SNF	Bed Capacity DMH Licensed	120
Mailing Address 904 HALL AVE SAVANNAH	MO 64485-1952	County ANDREW		No 04470
SAVANNAH	MO 04485-1952	Region 4 Medicare/Medicaid	Facility Number	04478
LAWRENCE COUNTY MANOR				
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit	Yes
MT VERNON	MO 65712-1612	Level of Care: SNF	Bed Capacity	90
Mailing Address 915 CARL ALLEN S		County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1 Medicare/Medicaid	Facility Number	04349
MI VERNOT	100 03712 1012	Region 1 Medical e/Medicalu	racinty runner	04347
LAWRENCE COUNTY RESIDENTI	AL CARE CENTER			
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit	No
MT VERNON	MO 65712-1612	Level of Care: RCF*	Bed Capacity	30
Mailing Address 915 CARL ALLEN S	Τ	County LAWRENCE	DMH Licensed	No
MT VERNON	MO 65712-1612	Region 1	Facility Number	04349
LAWSON MANOR & REHAB				
210 WEST 8TH TERRACE		<b>Telephone</b> (816) 580-3269	Alzheimer's Unit	Yes
LAWSON	MO 64062-9357	Level of Care: SNF	Bed Capacity	60
Mailing Address 210 WEST 8TH TER		County RAY	DMH Licensed	No
LAWSON	MO 64062-9357	Region 4 Medicare/Medicaid	Facility Number	07395
LEBANON NORTH NURSING & RE	CHAR			
596 MORTON RD		<b>Telephone</b> (417) 532-9173	Alzheimer's Unit	Yes
LEBANON	MO 65536-3648	Level of Care: SNF	Bed Capacity	180
Mailing Address 596 MORTON RD		County LACLEDE	DMH Licensed	No
LEBANON	MO 65536-3648	Region 1 Medicare/Medicaid	Facility Number	04369
LEBANON SOUTH NURSING & RE 514 WEST FREMONT ROAD	HAB			
		Telephone (417) 532 5351	Alzhoimor's Unit	No
		Telephone (417) 532-5351	Alzheimer's Unit	No
LEBANON	MO 65536-4244	Level of Care: SNF	Bed Capacity	116
LEBANON Mailing Address 514 WEST FREMON	MO 65536-4244 TT ROAD	Level of Care: SNF County LACLEDE	Bed Capacity DMH Licensed	116 No
LEBANON	MO 65536-4244	Level of Care: SNF	Bed Capacity	116
LEBANON Mailing Address 514 WEST FREMON	MO 65536-4244 IT ROAD MO 65536-4244	Level of Care: SNF County LACLEDE	Bed Capacity DMH Licensed	116 No
LEBANON  Mailing Address 514 WEST FREMON  LEBANON	MO 65536-4244 IT ROAD MO 65536-4244	Level of Care: SNF County LACLEDE	Bed Capacity DMH Licensed	116 No
LEBANON  Mailing Address 514 WEST FREMON  LEBANON  LEBANON SOUTH NURSING & RE	MO 65536-4244 IT ROAD MO 65536-4244	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	116 No 15650
LEBANON Mailing Address 514 WEST FREMON LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD	MO 65536-4244 TT ROAD MO 65536-4244 HAB	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	116 No 15650
LEBANON  Mailing Address 514 WEST FREMON  LEBANON  LEBANON SOUTH NURSING & RE  514 WEST FREMONT RD  LEBANON	MO 65536-4244 TT ROAD MO 65536-4244 HAB	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	116 No 15650 No 68
LEBANON  Mailing Address 514 WEST FREMON  LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD  LEBANON  Mailing Address 514 WEST FREMON  LEBANON	MO 65536-4244 TT ROAD MO 65536-4244  HAB MO 65536-4244 TT ROAD	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF County LACLEDE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	116 No 15650 No 68 No
LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON  LEBANON  LEBANON  LEBANON  LEBANON	MO 65536-4244 TT ROAD MO 65536-4244  HAB MO 65536-4244 TT ROAD	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF County LACLEDE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 15650 No 68 No 15650
LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEE HOUSE SENIOR LIVING LLC 105 NORTH MILL ST	MO 65536-4244 TT ROAD MO 65536-4244  HAB  MO 65536-4244 TT ROAD MO 65536-4244	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF County LACLEDE Region 1  Telephone (573) 392-5558	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	116 No 15650 No 68 No 15650
LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON	MO 65536-4244 TT ROAD MO 65536-4244  HAB MO 65536-4244 TT ROAD MO 65536-4244  MO 65536-4244	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF County LACLEDE Region 1  Telephone (573) 392-5558 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	116 No 15650 No 68 No 15650
LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEBANON SOUTH NURSING & RE 514 WEST FREMONT RD LEBANON  Mailing Address 514 WEST FREMON LEBANON  LEE HOUSE SENIOR LIVING LLC 105 NORTH MILL ST	MO 65536-4244 TT ROAD MO 65536-4244  HAB  MO 65536-4244 TT ROAD MO 65536-4244  MO 65536-4244	Level of Care: SNF County LACLEDE Region 1 Medicare/Medicaid  Telephone (417) 532-5351 Level of Care: RCF County LACLEDE Region 1  Telephone (573) 392-5558	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	116 No 15650 No 68 No 15650

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LEGENDARY NURSING & REHABI	LITATION LLC		
809 EAST GORDON ST		<b>Telephone</b> (660) 886-2247	Alzheimer's Unit No
MARSHALL	MO 65340-2811	Level of Care: SNF	<b>Bed Capacity</b> 92
Mailing Address 809 EAST GORDON S	ST	County SALINE	<b>DMH Licensed</b> No
MARSHALL	MO 65340-2811	Region 5 Medicare/Medicaid	Facility Number 04895
LEISURE LIVING			
305 5TH ST		<b>Telephone</b> (417) 235-5959	Alzheimer's Unit No
MONETT	MO 65708-2312	Level of Care: RCF	Bed Capacity 20
Mailing Address 305 5TH ST	WO 03708-2312	County BARRY	DMH Licensed Yes
MONETT	MO 65708-2312	Region 1	Facility Number 18227
MONETT	WO 03706-2312	Region 1	Facility Number 1822/
LENOIR HEALTH CARE CENTER			
3850 CARTWRIGHT LANE		<b>Telephone</b> (573) 876-5800	Alzheimer's Unit No
COLUMBIA	MO 65201-7779	Level of Care: SNF	Bed Capacity 100
Mailing Address 3850 CARTWRIGHT	LANE	County BOONE	<b>DMH Licensed</b> No
COLUMBIA	MO 65201-7779	Region 6 Medicare/Medicaid	Facility Number 04750
LENOIR MANOR			
3850 CARTWRIGHT LANE		<b>Telephone</b> (573) 876-5800	Alzheimer's Unit Yes
COLUMBIA	MO 65201-	Level of Care: ALF**	Bed Capacity 92
Mailing Address 3850 CARTWRIGHT		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-	Region 6	Facility Number 04750
COLUMBIA	110 03201	Region 0	racinty (uniber 04/30
LEONA HOUSE			
5000 NW OLD TRAIL ROAD		<b>Telephone</b> (816) 584-1033	Alzheimer's Unit Yes
KANSAS CITY	MO 64151-1946	Level of Care: ALF**	Bed Capacity 7
Mailing Address 5000 NW OLD TRAIL	L RD	County PLATTE	<b>DMH Licensed</b> No
KANSAS CITY	MO 64151-1946	Region 4	Facility Number 24748
LEVERING REGIONAL HEALTH C	ARE CENTER		
1734 MARKET ST	AND CENTER	<b>Telephone</b> (573) 221-2930	Alzheimer's Unit No
HANNIBAL	MO 63401-4025	Level of Care: RCF*	Bed Capacity 35
Mailing Address 1734 MARKET ST	00.101.1020	County MARION	DMH Licensed Yes
HANNIBAL	MO 63401-4025	Region 5	Facility Number 15954
			10/07
LEVERING REGIONAL HEALTH C	ARE CENTER		
1734 MARKET ST		<b>Telephone</b> (573) 221-2930	Alzheimer's Unit No
HANNIBAL	MO 63401-4025	Level of Care: SNF	<b>Bed Capacity</b> 179
Mailing Address 1734 MARKET ST		County MARION	<b>DMH Licensed</b> No
HANNIBAL	MO 63401-4025	<b>Region</b> 5 <b>Medicare/Medicaid</b>	Facility Number 15954
LEWIS & CLARK GARDENS			
1221 BOONES LICK RD		<b>Telephone</b> (636) 946-6140	Alzheimer's Unit No
SAINT CHARLES	MO 63301-2328	Level of Care: SNF	Bed Capacity 142
Mailing Address 1221 BOONES LICK I		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63301-2328	Region 5 Medicare/Medicaid	Facility Number 01266
STILL CHARLES	110 03301 2320	region - vicultare/medicald	1 ucinity 1 unifici

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LEWIS COUNTY NURSING HOME	DISTRICT		
17528 STATE HIGHWAY 81 N		<b>Telephone</b> (573) 288-4454	Alzheimer's Unit Yes
CANTON	MO 63435-3463	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 266		County LEWIS	DMH Licensed No
CANTON	MO 63435-0266	Region 5 Medicare/Medicaid	Facility Number 04790
LICKING RESIDENTIAL CARE			
225 WEST HIGHWAY 32		<b>Telephone</b> (573) 674-2207	Alzheimer's Unit No
LICKING	MO 65542-9832	Level of Care: RCF*	Bed Capacity 34
Mailing Address 225 WEST HIGHWA		County TEXAS	DMH Licensed No
LICKING	MO 65542-9832	Region 1	Facility Number 24302
LIEE CARE CENTED OF PRINCET	YON		
LIFE CARE CENTER OF BRIDGET 12145 BRIDGETON SQUARE DR	UN	<b>Telephone</b> (314) 298-7444	Alzheimer's Unit No
BRIDGETON  BRIDGETON	MO 63044-2616	Level of Care: SNF	Bed Capacity 91
Mailing Address 12145 BRIDGETON		County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044-2616		
DRIDGETON	WO 03044-2010	Region 7 Medicare/Medicaid	Facility Number 12141
LIFE CARE CENTER OF BROOKF	IELD		
315 HUNT ST		<b>Telephone</b> (660) 258-3367	Alzheimer's Unit Yes
BROOKFIELD	MO 64628-2412	Level of Care: SNF	Bed Capacity 120
Mailing Address 315 HUNT ST		County LINN	DMH Licensed No
BROOKFIELD	MO 64628-2412	Region 5 Medicare/Medicaid	Facility Number 00822
		Treated of Treated a	00022
LIFE CARE CENTER OF CAPE GIA	RARDEAU		
365 SOUTH BROADVIEW ST		<b>Telephone</b> (573) 335-2086	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63703-5725	Level of Care: SNF	Bed Capacity 120
Mailing Address 365 SOUTH BROAD	VIEW ST	County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-5725	Region 2 Medicare/Medicaid	Facility Number 01032
LIFE CARE CENTER OF CARROL	LTON	m 1 1 (220) 512 0155	A11
300 LIFE CARE LN		<b>Telephone</b> (660) 542-0155	Alzheimer's Unit Yes
CARROLLTON	MO 64633-1861	Level of Care: SNF	Bed Capacity 120
Mailing Address 300 LIFE CARE LN	NO (1622 1061	County CARROLL	DMH Licensed No
CARROLLTON	MO 64633-1861	Region 4 Medicare/Medicaid	Facility Number 11500
LIFE CARE CENTER OF GRANDV	IEW		
6301 EAST 125TH ST		<b>Telephone</b> (816) 765-7714	Alzheimer's Unit Yes
GRANDVIEW	MO 64030-1884	Level of Care: SNF	Bed Capacity 172
Mailing Address 6301 EAST 125TH S		County JACKSON	DMH Licensed No
GRANDVIEW	MO 64030-1884	Region 3 Medicare/Medicaid	Facility Number 11929
			11/2/
LIFE CARE CENTER OF ST LOUIS	\$		
3520 CHOUTEAU AVE		<b>Telephone</b> (314) 771-2100	Alzheimer's Unit No
SAINT LOUIS	MO 63103-2916	Level of Care: SNF	Bed Capacity 100
Mailing Address 3520 CHOUTEAU A		County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63103-2916	Region 7 Medicare/Medicaid	Facility Number 19823

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A WEE CARE CENTER OF CHILANA	. <b>Y</b>		
LIFE CARE CENTER OF SULLIVAN 875 DUNSFORD DR		<b>Telephone</b> (573) 468-3128	Alzheimer's Unit No
SULLIVAN	MO 63080-1238	Level of Care: SNF	Bed Capacity 120
Mailing Address 875 DUNSFORD DR	WO 03080-1238	County FRANKLIN	DMH Licensed No
SULLIVAN	MO 63080-1238	Region 6 Medicare/Medicaid	Facility Number 07744
SCELIVILL	110 03000 1230	Region o Medicale/Medicalu	racincy runner 07744
LIFE CARE CENTER OF WAYNESY	ZILLE		
700 BIRCH LN		<b>Telephone</b> (573) 774-6456	Alzheimer's Unit Yes
WAYNESVILLE	MO 65583-2275	Level of Care: SNF	Bed Capacity 120
Mailing Address 700 BIRCH LN		County PULASKI	DMH Licensed No
WAYNESVILLE	MO 65583-2275	Region 6 Medicare/Medicaid	Facility Number 04592
A MEET EN WANGE MEN WAY A GEOOG	D THE OZ I DIG ING		
LIFE ENHANCEMENT VILLAGE O	F THE OZARKS INC	T-l (417) 725 5166	Alabatan arta Tiata Na
732 SOUTH GREGG ROAD	MO 65714 7410	Telephone (417) 725-5166 Level of Care: RCF*	Alzheimer's Unit No Bed Capacity 44
NIXA	MO 65714-7419		
Mailing Address 732 SOUTH GREGG		County CHRISTIAN	DMH Licensed Yes
NIXA	MO 65714-7419	Region 1	Facility Number 14190
LINCOLN COMMUNITY CARE CEN	NTER		
205 TIMBERLINE DR		<b>Telephone</b> (660) 547-3322	Alzheimer's Unit No
LINCOLN	MO 65338-2007	Level of Care: SNF	Bed Capacity 66
Mailing Address 205 TIMBERLINE DE		County BENTON	DMH Licensed No
LINCOLN	MO 65338-2007	Region 6 Medicare/Medicaid	Facility Number 04803
		region 5 medicare/medicard	Tuesday 1 (united to 1003
LINCOLN COUNTY NURSING & RE	ЕНАВ		
1145 EAST CHERRY ST		<b>Telephone</b> (636) 528-5712	Alzheimer's Unit No
TROY	MO 63379-1520	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 130		County LINCOLN	<b>DMH Licensed</b> No
TROY	MO 63379-0130	Region 5 Medicare/Medicaid	Facility Number 15750
LINDELL MANOR			
4336 LINDELL BLVD		<b>Telephone</b> (314) 652-4828	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2702	Level of Care: RCF*	Bed Capacity 20
Mailing Address PO BOX 525	WO 03108-2702	County SAINT LOUIS CITY	DMH Licensed Yes
CUBA	MO 65453-		Facility Number 10470
СОВА	WO 03433-	Region 7	racincy rumber 104/0
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET		<b>Telephone</b> (816) 268-4000	Alzheimer's Unit No
GLADSTONE	MO 64119-7400	Level of Care: ALF**	Bed Capacity 40
Mailing Address 2901 NE 72ND STRE	ET	County CLAY	<b>DMH Licensed</b> No
GLADSTONE	MO 64119-7400	Region 4	Facility Number 30156
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET		<b>Telephone</b> (816) 268-4000	Alzheimer's Unit No
GLADSTONE	MO 64119-7400	Level of Care: SNF	Bed Capacity 40
Mailing Address 2901 NE 72ND STRE		County CLAY	DMH Licensed No
GLADSTONE	MO 64119-7400	Region 4 Medicare/Medicaid	Facility Number 30156

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LINN OAK REHABILITATION CENT	TER	TEMPORARY CLO	SURE - STAFFING
196 HIGHWAY CC		<b>Telephone</b> (573) 897-0700	Alzheimer's Unit no
LINN	MO 65051-3500	Level of Care: SNF	<b>Bed Capacity</b> 132
Mailing Address 196 HIGHWAY CC		County OSAGE	<b>DMH Licensed</b> No
LINN	MO 65051-3500	Region 6 Medicare/Medicaid	Facility Number 14130
LIVING CENTER, THE			
2506 LINDEN TREE PARKWAY		<b>Telephone</b> (660) 886-9676	Alzheimer's Unit Yes
	MO 65340-0017	Level of Care: SNF	Bed Capacity 99
Mailing Address PO BOX 370		County SALINE	DMH Licensed No
MARSHALL	MO 65340-0370	Region 5 Medicare/Medicaid	Facility Number 21791
LIVING COMMUNITY OF ST JOSEPH	н		
1202 HEARTLAND RD	<del></del>	<b>Telephone</b> (816) 671-8500	Alzheimer's Unit No
	MO 64506-3200	Level of Care: ALF	Bed Capacity 35
Mailing Address 1202 HEARTLAND RE		County BUCHANAN	DMH Licensed No
_	MO 64506-3200	Region 4	Facility Number 24179
D/MVI JOBEJ II	NO 04300 3200	Region +	24179
LIVING COMMUNITY OF ST JOSEPH	Н		
1202 HEARTLAND RD		<b>Telephone</b> (816) 671-8500	Alzheimer's Unit No
SAINT JOSEPH	MO 64506-3200	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1202 HEARTLAND RD	)	County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-3200	Region 4 Medicare/Medicaid	Facility Number 24179
I WINGGEOV MANOR GARE GENERAL	an and an		
LIVINGSTON MANOR CARE CENTE	.R	T-1	A 1-1
939 E BIRCH DR	MO (4(01 2190	<b>Telephone</b> (660) 646-5177	Alzheimer's Unit Yes
	MO 64601-2189	Level of Care: SNF	Bed Capacity 94
Mailing Address 939 E BIRCH DR	MO (4(01 2190	County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-2189	Region 4 Medicare/Medicaid	Facility Number 20099
LOCH HAVEN			
701 SUNSET HILLS DR		<b>Telephone</b> (660) 385-3113	Alzheimer's Unit No
MACON	MO 63552-2165	Level of Care: RCF*	<b>Bed Capacity</b> 26
Mailing Address PO BOX 187		County MACON	DMH Licensed No
	MO 63552-0187	Region 5	Facility Number 04739
LOCH HAVEN			
701 SUNSET HILLS DR		<b>Telephone</b> (660) 385-3113	Alzheimer's Unit Yes
	MO 63552-2165	Level of Care: SNF	<b>Bed Capacity</b> 160
Mailing Address PO BOX 187		County MACON	<b>DMH Licensed</b> No
MACON	MO 63552-0187	Region 5 Medicare/Medicaid	Facility Number 04739
LODGE RESIDENTIAL CARE FACIL	JTY, THE		
3860 EAST 60TH ST		<b>Telephone</b> (816) 599-5235	Alzheimer's Unit No
	MO 64130-4418	Level of Care: RCF	Bed Capacity 8
Mailing Address 3860 EAST 60TH ST		County JACKSON	DMH Licensed No
_	MO 64130-4418	Region 3	Facility Number 16211
IN II 10/10 CIT I	110 01100 1110	region 5	10211

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LODGE THE			
LODGE, THE 542 STATE ROAD DD		Tolophone (660) 249 2277	Alahaiman'a Unit No
FAYETTE	MO 65248-9658	Telephone (660) 248-2277 Level of Care: ALF**	Alzheimer's Unit No Bed Capacity 60
Mailing Address 542 STATE RD DD	WO 03248-9038	County HOWARD	DMH Licensed Yes
FAYETTE	MO 65248-9658	Region 5	Facility Number 28815
PATETIE	WO 03246-9038	Region 5	Facility Number 28813
LODGES, THE			
2401 W GRAND ST		<b>Telephone</b> (417) 864-4545	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4967	Level of Care: RCF*	Bed Capacity 99
Mailing Address 2401 W GRAND ST		County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65802-4967	Region 1	Facility Number 09756
LOVING ADMONEMORY CARE AN	UD A COLOTED I ININIC		
LOVING ARMS MEMORY CARE AN 1300 EAST 24TH ST	ND ASSISTED LIVING	<b>Telephone</b> (660) 851-2266	Alzheimer's Unit ves
SEDALIA	MO 65301-8233	Telephone (660) 851-2266 Level of Care: ALF**	Alzheimer's Unit yes Bed Capacity 20
Mailing Address 1300 EAST 24TH STR		County PETTIS	DMH Licensed No
SEDALIA	MO 65301-8233	Region 6	Facility Number 15971
SEDALIA	WIO 03301-0233	Region 0	racinty Number 139/1
LUTHER MANOR RETIREMENT &	NURSING CENTER		
3170 HIGHWAY 61 NORTH		<b>Telephone</b> (573) 221-5533	Alzheimer's Unit No
HANNIBAL	MO 63401-6571	Level of Care: SNF	<b>Bed Capacity</b> 64
Mailing Address 3170 HIGHWAY 61 N	ORTH	County MARION	DMH Licensed No
HANNIBAL	MO 63401-6571	Region 5 Medicare/Medicaid	Facility Number 04673
LUTHERAN CONVALESCENT HOM	1E		
723 SOUTH LACLEDE STATION RD		<b>Telephone</b> (314) 968-5570	Alzheimer's Unit No
WEBSTER GROVES	MO 63119-4911	Level of Care: SNF	<b>Bed Capacity</b> 286
Mailing Address 723 SOUTH LACLED	E STATION RD	County SAINT LOUIS COUNTY	DMH Licensed No
WEBSTER GROVES	MO 63119-4911	Region 7 Medicare/Medicaid	Facility Number 04695
LUTHERAN GOOD SHEPHERD HO	ME		
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit
CONCORDIA	MO 64020-9643	Level of Care: ALF**	<b>Bed Capacity</b> 53
Mailing Address PO BOX 849		County LAFAYETTE	<b>DMH Licensed</b> No
CONCORDIA	MO 64020-0849	Region 3	Facility Number 04705
LUTHERAN HOME ASSISTED LIVE	NG		
2825 BLOOMFIELD RD		<b>Telephone</b> (573) 335-0158	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63703-6335	Level of Care: ALF**	Bed Capacity 115
Mailing Address 2825 BLOOMFIELD F		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-6335	Region 2	Facility Number 13536
	- 00,00 0000		_ 15550
LUTHERAN HOME, THE			
2825 BLOOMFIELD RD		<b>Telephone</b> (573) 335-0158	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63703-6335	Level of Care: SNF	<b>Bed Capacity</b> 274
Mailing Address 2825 BLOOMFIELD F		County CAPE GIRARDEAU	<b>DMH Licensed</b> No
CAPE GIRARDEAU	MO 63703-6335	Region 2 Medicare/Medicaid	Facility Number 13536

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LUTHERAN NURSING HOME				
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit	Yes
CONCORDIA	MO 64020-9643	Level of Care: SNF	Bed Capacity	113
Mailing Address PO BOX 849		County LAFAYETTE	DMH Licensed	No
CONCORDIA	MO 64020-0849	Region 3 Medicare/Medicaid	Facility Number	04705
LUTHERAN SENIOR SERVICES AT	RREEZE PARK			
600 BREEZE PARK DR	BREEZETAKK	<b>Telephone</b> (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care: SNF	Bed Capacity	81
Mailing Address 600 BREEZE PARK I		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5 Medicare/Medicaid	Facility Number	20704
SAIR CHARLES	110 03304 7137	Region 5 Wedicare/Medicard	Pacinty Number	20704
LUTHERAN SENIOR SERVICES AT	BREEZE PARK			
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63304-9139	Level of Care: ALF**	Bed Capacity	23
Mailing Address 600 BREEZE PARK I	OR	County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number	20704
LUTHERAN SENIOR SERVICES AT	RREEZE PARK			
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-9139	Level of Care: ALF	Bed Capacity	56
Mailing Address 600 BREEZE PARK I		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number	20704
		Region 5	Tuellity I tullioer	20704
LUTHERAN SENIOR SERVICES AT	MERAMEC BLUFFS			
50 MERAMEC TRAIL DR		<b>Telephone</b> (636) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care: SNF	Bed Capacity	128
Mailing Address 50 MERAMEC TRAIL		County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7 Medicare/Medicaid	Facility Number	23643
LUTHERAN SENIOR SERVICES AT	MERAMEC BLUFFS			
50 MERAMEC TRAIL DR		<b>Telephone</b> (636) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care: ALF**	Bed Capacity	100
Mailing Address 50 MERAMEC TRAIL	L DR	County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7	Facility Number	23643
I VNN'S HEDITACE HOUSE INC				
LYNN'S HERITAGE HOUSE, INC 800 KELLY LN		<b>Telephone</b> (573) 754-4020	Alzheimer's Unit	Yes
LOUISIANA	MO 63353-2415	Level of Care: ALF**	Bed Capacity	44
Mailing Address 800 KELLY LN	110 03333 2413	County PIKE	DMH Licensed	No
LOUISIANA	MO 63353-2415	Region 5	Facility Number	21055
LOUBIANA	110 03333-2413	Acgiuii J	racinty (vuilibe)	41033
MACON HEALTH CARE CENTER				
29612 KELLOGG AVE		<b>Telephone</b> (660) 385-5797	Alzheimer's Unit	Yes
MACON	MO 63552-3702	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 465	MO 62552 0465	County MACON	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

04914

MO 63552-0465

MACON

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MADISON SENIOR LIVING THE			
14001 MADISON AVENUE	<b>Telephone</b> 816-627-1726	Alzheimer's Unit	Yes
KANSAS CITY MO 64145-1613	<b>Level of Care:</b> ALF**	Bed Capacity	66
Mailing Address 14001 MADISON AVENUE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64145-1613	<b>Region</b> 3	Facility Number	32321
MAGNOLIA HOUSE			
204 GRAND AVE	<b>Telephone</b> (636) 933-0662	Alzheimer's Unit	No
FESTUS MO 63028-1842	Level of Care: RCF	Bed Capacity	12
Mailing Address 204 GRAND AVE	County JEFFERSON	DMH Licensed	Yes
FESTUS MO 63028-1842	Region 2	Facility Number	13697
MAGNOLIA SQUARE NURSING AND REHAB			
1502 WEST EDGEWOOD	<b>Telephone</b> (417) 877-7545	Alzheimer's Unit	No
SPRINGFIELD MO 65807-3567	Level of Care: SNF	Bed Capacity	120
Mailing Address 1502 WEST EDGEWOOD	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-3567		Facility Number	
SPRINGPIELD MO 03607-3307	Region <sup>1</sup> Medicare/Medicaid	racinty Number	23400
MANOR AT ELFINDALE, THE			
1707 WEST ELFINDALE ST	<b>Telephone</b> (417) 831-2273	Alzheimer's Unit	Yes
SPRINGFIELD MO 65807-1246	Level of Care: SNF	Bed Capacity	100
Mailing Address 1707 WEST ELFINDALE ST	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65807-1246	Region 1 Medicare	Facility Number	17371
MANOR GROVE, INCORPORATED			
711 SOUTH KIRKWOOD RD	<b>Telephone</b> (314) 965-0864	Alzheimer's Unit	No
KIRKWOOD MO 63122-5928	Level of Care: SNF	Bed Capacity	117
Mailing Address 711 SOUTH KIRKWOOD RD	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO 63122-5928	Region 7 Medicare/Medicaid	Facility Number	06038
MANOR, THE 2071 BARRON RD	<b>Telephone</b> (573) 686-1147	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-1903	Level of Care: SNF	Bed Capacity	90
Mailing Address 2071 BARRON RD	County BUTLER	DMH Licensed	No
POPLAR BLUFF MO 63901-1903	Region 2 Medicare/Medicaid	Facility Number	00683
TOTELIN DECIT	region 2 Medicare/Medicard	Tuesting Tuninger	00003
MAPLE CREST MANOR			
430 NORTH FREDERICK STREET	<b>Telephone</b> (573) 334-2662	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701-4835	Level of Care: RCF*	<b>Bed Capacity</b>	48
Mailing Address 430 NORTH FREDERICK STREET	County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU MO 63701-4835	Region 2	Facility Number	03628
MAPLE GROVE LODGE			
2407 KENTUCKY ST	<b>Telephone</b> (573) 754-5456	Alzheimer's Unit	No
LOUISIANA MO 63353-2503	Level of Care: SNF	Bed Capacity	90
Mailing Address 2407 KENTUCKY ST	County PIKE	DMH Licensed	No
LOUISIANA MO 63353-2503	Region 5 Medicare/Medicaid	Facility Number	05002
20022111	region - Miculcal Civiculcalu	- uciny minut	03002

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MAPLE LAWN NURSING HOME		T. 1 (770) 7 (0 0010		
1410 WEST LINE ST	10 62161 1021	<b>Telephone</b> (573) 769-2213	Alzheimer's Unit	Yes
PALMYRA	MO 63461-1831	Level of Care: SNF	Bed Capacity	110
Mailing Address PO BOX 232	MO (0461 0222	County MARION	DMH Licensed	No
PALMYRA	MO 63461-0232	Region 5 Medicare/Medicaid	Facility Number	09961
MAPLE RIDGE RESIDENTIAL CA	RE CENTER LLC			
1034 DORIS DR		<b>Telephone</b> (573) 760-0155	Alzheimer's Unit	No
FARMINGTON	MO 63640-1954	Level of Care: RCF*	Bed Capacity	20
Mailing Address PO BOX 272		County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-0272	Region 2	Facility Number	19808
MAPLE SENIOR LIVING LLC				
3 SOUTHWEST FIRST LANE		<b>Telephone</b> (417) 682-6184	Alzheimer's Unit	No
LAMAR	MO 64759-8313	Level of Care: RCF*	Bed Capacity	57
Mailing Address 3 SOUTHWEST FIR	RST LANE	County BARTON	DMH Licensed	No
LAMAR	MO 64759-8313	Region 1	Facility Number	20869
		<u> </u>		
MAPLE TREE TERRACE - ASSIST	TED LIVING BY AMERICARE			
2510 CLINTON ST		<b>Telephone</b> (417) 358-7201	Alzheimer's Unit	No
CARTHAGE	MO 64836-3427	Level of Care: ALF**	<b>Bed Capacity</b>	50
Mailing Address 2510 CLINTON ST		County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3427	Region 1	<b>Facility Number</b>	17660
MAPLEBROOK-ASSISTED LIVING	G BY AMERICARE			
520 MAPLE VALLEY DR		<b>Telephone</b> (573) 756-2777	Alzheimer's Unit	Yes
FARMINGTON	MO 63640-1981	Level of Care: ALF**	Bed Capacity	61
Mailing Address 520 MAPLE VALLE	EY DR	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-1981	Region 2	Facility Number	28635
MAPLES HEALTH AND REHABIL	ITATION THE			
610 WEST SUNSET ST	aranon, me	<b>Telephone</b> (417) 891-1700	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-3696	Level of Care: SNF	Bed Capacity	120
Mailing Address 610 WEST SUNSET		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-3696	Region 1 Medicare/Medicaid	Facility Number	06441
			·	
MAPLEWOOD, INC				
1827 CRADER DR		<b>Telephone</b> (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF	Bed Capacity	13
Mailing Address 1827 CRADER DR		County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number	16964
			-	
MAPLEWOOD, INC				
1827 CRADER DR		<b>Telephone</b> (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF**	<b>Bed Capacity</b>	24
Mailing Address 1827 CRADER DR		County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-2005	Region 6	<b>Facility Number</b>	16964

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MARANATHA VILLAGE, INC			
233 EAST NORTON RD		<b>Telephone</b> (417) 833-0016	Alzheimer's Unit No
SPRINGFIELD	MO 65803-3633	Level of Care: RCF	<b>Bed Capacity</b> 29
Mailing Address 233 EAST NORTON		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65803-3633	Region 1	Facility Number 04907
MARANATHA VILLAGE, INC			
233 EAST NORTON RD		<b>Telephone</b> (417) 833-0016	Alzheimer's Unit No
SPRINGFIELD	MO 65803-3633	Level of Care: SNF	Bed Capacity 120
Mailing Address 233 EAST NORTON		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65803-3633	Region 1 Medicare/Medicaid	Facility Number 04907
MADI DE VILLA DECEDEMENTE CE	ENIMED INC		
MARI DE VILLA RETIREMENT CE	ENTER, INC	Tolonhono (626) 227 5247	Alzheimer's Unit No
13900 CLAYTON RD TOWN AND COUNTRY	MO 63017-8406	Telephone (636) 227-5347 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 224
			DMH Licensed No
Mailing Address 13900 CLAYTON RE TOWN AND COUNTRY	MO 63017-8406	•	
TOWN AND COUNTRY	MO 03017-8400	Region 7	Facility Number 05047
MARIAN CLIFF RESIDENTIAL CA	RE CENTER LLC		
381 ELM ST		<b>Telephone</b> (573) 543-2218	Alzheimer's Unit No
SAINT MARY	MO 63673-9330	Level of Care: RCF*	<b>Bed Capacity</b> 66
Mailing Address PO BOX 272		County SAINTE GENEVIEVE	DMH Licensed Yes
FARMINGTON	MO 63640-0272	Region 2	Facility Number 05058
		S	•
MARIES MANOR			
174 BALLPARK RD		<b>Telephone</b> (573) 422-3177	Alzheimer's Unit No
VIENNA	MO 65582-8043	Level of Care: SNF	<b>Bed Capacity</b> 98
Mailing Address 174 BALLPARK RD		<b>County</b> MARIES	<b>DMH Licensed</b> No
VIENNA	MO 65582-8043	Region 6 Medicare/Medicaid	Facility Number 10491
MARK THAT A GOLGTON A WING	nya.		
MARK TWAIN ASSISTED LIVING,	INC	T-lh (CO) 2C2 C515	Al-la-i
901 UNION AVE	MO (5270 245)	<b>Telephone</b> (660) 263-6515	Alzheimer's Unit No
MOBERLY  Mailing Address 901 UNION AVE	MO 65270-2456	Level of Care: ALF**  County RANDOLPH	Bed Capacity 42  DMH Licensed No
MOBERLY	MO 65270-2456	•	
MODERLI	MO 03270-2430	Region 5	Facility Number 16369
MARK TWAIN CARING CENTER			
3001 MAY ST		<b>Telephone</b> (573) 686-6999	Alzheimer's Unit Yes
POPLAR BLUFF	MO 63901-1942	Level of Care: SNF	Bed Capacity 120
Mailing Address 3001 MAY ST		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-1942	Region 2 Medicare/Medicaid	Facility Number 16013
MADIZ TWAINI MANOP			
MARK TWAIN MANOR		Tolophono (214) 201 9240	Algheimen's Unit
11988 MARK TWAIN LN BRIDGETON	MO 63044 2825	Telephone (314) 291-8240 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 120
	MO 63044-2825		Bed Capacity 120  DMH Licensed No
Mailing Address 11988 MARK TWAIN BRIDGETON	MO 63044-2825	·	
DRIDGETON	WIO 03044-2023	Region 7 Medicare/Medicaid	Facility Number 08188

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MARSHFIELD CARE CENTER FOR	R REHAB AND HEALTHCARE		
800 SOUTH WHITE OAK		<b>Telephone</b> (417) 859-3701	Alzheimer's Unit No
MARSHFIELD	MO 65706-2231	Level of Care: SNF	<b>Bed Capacity</b> 74
Mailing Address 800 SOUTH WHITE		County WEBSTER	<b>DMH Licensed</b> No
MARSHFIELD	MO 65706-2231	Region 1 Medicare/Medicaid	Facility Number 18481
MARSHFIELD PLACE			
820 SOUTH WHITE OAK STREET		<b>Telephone</b> (417) 859-6133	Alzheimer's Unit No
MARSHFIELD	MO 65706-2231	Level of Care: RCF*	Bed Capacity 40
Mailing Address 820 SOUTH WHITE	OAK STREET	County WEBSTER	DMH Licensed Yes
MARSHFIELD	MO 65706-2231	Region 1	Facility Number 20500
MADY CHI VED HOME THE			
MARY CULVER HOME, THE 221 WEST WASHINGTON AVE		<b>Telephone</b> (314) 966-6034	Alzheimer's Unit No
KIRKWOOD	MO 63122-3916	Level of Care: ICF	Bed Capacity 28
Mailing Address 221 W WASHINGTO		County SAINT LOUIS COUNTY	DMH Licensed No
KIRKWOOD	MO 63122-3916	•	
KIKKWOOD	WO 03122-3910	Region 7	Facility Number 00592
MARY, QUEEN AND MOTHER CEN	NTER		
7601 WATSON RD		<b>Telephone</b> (314) 961-8000	Alzheimer's Unit NO
SHREWSBURY	MO 63119-5001	Level of Care: SNF	<b>Bed Capacity</b> 230
Mailing Address 7601 WATSON RD		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SHREWSBURY	MO 63119-5001	Region 7 Medicare/Medicaid	Facility Number 05103
MARYMOUNT MANOR			
313 AUGUSTINE RD		<b>Telephone</b> (636) 938-6770	Alzheimer's Unit No
EUREKA	MO 63025-1935	Level of Care: RCF*	Bed Capacity 100
Mailing Address PO BOX 600		County SAINT LOUIS COUNTY	DMH Licensed Yes
EUREKA	MO 63025-0600	Region 7	Facility Number 05117
MARYMOUNT MANOR			
313 AUGUSTINE RD		<b>Telephone</b> (636) 938-6770	Alzheimer's Unit Yes
EUREKA	MO 63025-1935	Level of Care: SNF	Bed Capacity 174
Mailing Address PO BOX 600	MO 03023-1933	County SAINT LOUIS COUNTY	DMH Licensed No
EUREKA	MO 63025-0600	Region 7 Medicare/Medicaid	Facility Number 05117
LUKLKA	WO 03023-0000	Region / Medicare/Medicard	racinty Number 03117
MARYVILLE CHATEAU			
1101 E 5TH STREET		<b>Telephone</b> (660) 582-7447	Alzheimer's Unit No
MARYVILLE	MO 64468-1955	Level of Care: RCF	Bed Capacity 20
Mailing Address 1101 E 5TH STREET		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE	MO 64468-1955	Region 4	Facility Number 05149
MARYVILLE LIVING CENTER			
524 NORTH LAURA		<b>Telephone</b> (660) 582-7447	Alzheimer's Unit Yes
MARYVILLE	MO 64468-1955	Level of Care: SNF	<b>Bed Capacity</b> 105
Mailing Address 524 NORTH LAURA		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE	MO 64468-1955	Region 4 Medicare/Medicaid	Facility Number 05149

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MASON POINTE CARE CENTER				
13190 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 434-3300	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-5917	Level of Care: SNF	<b>Bed Capacity</b>	256
Mailing Address 13190 SOUTH OU	TER 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5917	Region 7 Medicare/Medicaid	Facility Number	03957
MAGON BODIES CARE CENTER				
MASON POINTE CARE CENTER		TO 1 1 (214) 424 2200	AT TOTAL TOTAL	NI-
13190 SOUTH OUTER 40 RD CHESTERFIELD	MO 62017 5017	Telephone (314) 434-3300	Alzheimer's Unit	No
	MO 63017-5917	Level of Care: ALF**	Bed Capacity	62 N-
Mailing Address 13190 SOUTH OU		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-5917	Region 7	Facility Number	03957
MATTIS POINTE - ASSISTED LIV	VING BY AMERICARE			
4962 MATTIS ROAD		<b>Telephone</b> (314) 328-4084	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63128-2795	Level of Care: ALF**	<b>Bed Capacity</b>	120
Mailing Address 4962 MATTIS ROA	AD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-2795	Region 7	Facility Number	30805
MANINOOD MANOD				
MAYWOOD MANOR		TO 1 1 (916) 254 6790	A1 1 1	NI-
1041 WEST TRUMAN RD	MO 64050-3447	Telephone (816) 254-6789 Level of Care: RCF*	Alzheimer's Unit	No 24
INDEPENDENCE			Bed Capacity	= -
Mailing Address 1041 WEST TRUM		County JACKSON	DMH Licensed	Yes
INDEPENDENCE	MO 64050-3447	Region 3	Facility Number	03948
MAYWOOD TERRACE LIVING O	CENTER			
10300 EAST TRUMAN RD		<b>Telephone</b> (816) 836-1250	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64052-2258	Level of Care: SNF	<b>Bed Capacity</b>	89
Mailing Address 10300 EAST TRUM	MAN RD	County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64052-2258	Region 3 Medicare/Medicaid	Facility Number	08673
MCCLAY SENIOR CARE				
3801 MCCLAY ROAD		<b>Telephone</b> (636) 244-3323	Alzheimer's Unit	No
SAINT PETERS	MO 63376-7327	Level of Care: SNF	Bed Capacity	60
Mailing Address 3801 MCCLAY RO	OAD	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-7327	Region 5 Medicare/Medicaid	Facility Number	29933
MCCRITE PLAZA AT BRIARCLI	DE ACCICTED I IVING			
1201 NW TULLISON RD	FF ASSISTED LIVING	<b>Telephone</b> (816) 888-7930	Alzheimer's Unit	Yes
KANSAS CITY	MO 64116-2639	Telephone (816) 888-7930 Level of Care: ALF**		164
			Bed Capacity DMH Licensed	
Mailing Address 1201 NW TULLISC		•		No 20084
KANSAS CITY	MO 64116-2639	Region 4	Facility Number	29084
MCCRITE PLAZA AT BRIARCLI	FF SKILLED FACILITY			
1301 TULLISON ROAD		<b>Telephone</b> (816) 888-7930	Alzheimer's Unit	No
KANSAS CITY	MO 64116-2640	Level of Care: SNF	<b>Bed Capacity</b>	56
Mailing Address 1201 NW TULLISO	ON ROAD	County CLAY	DMH Licensed	No
	3.50 (14.4 ( 3.60)	- A	T1 1114 B7 1	

Medicare

**Facility Number** 

29084

MO 64116-2639

KANSAS CITY

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MCDONALD BOARDING HOME				
438 NORTH 17TH ST		<b>Telephone</b> (816) 233-7060	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-2015	Level of Care: RCF	Bed Capacity	8
Mailing Address 438 NORTH 17TH S		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64501-2015	Region 4	Facility Number	05170
MCDONALD COUNTY LIVING CE	ENTER			
1000 PATTERSON ST		<b>Telephone</b> (417) 845-3351	Alzheimer's Unit	Yes
ANDERSON	MO 64831-7327	Level of Care: SNF	<b>Bed Capacity</b>	96
Mailing Address 1000 PATTERSON	ST	County MCDONALD	DMH Licensed	No
ANDERSON	MO 64831-7327	Region 1 Medicare/Medicaid	Facility Number	05183
MCKNIGHT PLACE ASSISTED LI	VING AND MEMORY CARE			
THREE MCKNIGHT PLACE	VING III D MEMORI CIRE	<b>Telephone</b> (314) 993-3333	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity	55
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS				
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number	23542
MCKNIGHT PLACE ASSISTED LI	VINC AND MEMODY CADE			
	VING AND MEMORY CARE	TO 1 1 (214) 007 5222	A1 1	NI.
THREE MCKNIGHT PL	MO (2124 1000	<b>Telephone</b> (314) 997-5333	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1900	Level of Care: ALF**	Bed Capacity	120
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number	23542
MCKNIGHT PLACE EXTENDED (	ADE			
MICKNIGHT FLACE EXTENDED				
TWO MCKNIGHT DI	CARL	Telephone (214) 002 2221	Alzhaimar's Unit	No
TWO MCKNIGHT PL		Telephone (314) 993-2221	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	<b>Bed Capacity</b>	70
SAINT LOUIS  Mailing Address TWO MCKNIGHT F	MO 63124-1900 PL	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	70 No
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	<b>Bed Capacity</b>	70
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS	MO 63124-1900 PL	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	70 No
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE	MO 63124-1900 PL	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare	Bed Capacity DMH Licensed Facility Number	70 No 18914
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT	MO 63124-1900 PL MO 63124-1900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	70 No 18914
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD	MO 63124-1900 PL	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	70 No 18914 No 60
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129	MO 63124-1900 PL MO 63124-1900 MO 64628-1300	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	70 No 18914 No 60 No
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD	MO 63124-1900 PL MO 63124-1900	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	70 No 18914 No 60
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129 BROOKFIELD	MO 63124-1900 PL MO 63124-1900  MO 64628-1300  MO 64628-0129	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	70 No 18914 No 60 No
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING	MO 63124-1900 PL MO 63124-1900  MO 64628-1300  MO 64628-0129	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN	MO 63124-1900  MO 63124-1900  MO 64628-1300  MO 64628-0129	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY	MO 63124-1900  MO 63124-1900  MO 64628-1300  MO 64628-0129  MO 65270-4550	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE	MO 63124-1900 PL MO 63124-1900  MO 64628-1300  MO 64628-0129  MO 65270-4550  GE LANE	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY	MO 63124-1900  MO 63124-1900  MO 64628-1300  MO 64628-0129  MO 65270-4550	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE MOBERLY	MO 63124-1900 PL MO 63124-1900  MO 64628-1300  MO 64628-0129  MO 65270-4550  GE LANE MO 65270-4550	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	70 No 18914 No 60 No 05220
SAINT LOUIS  Mailing Address TWO MCKNIGHT ESAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE MOBERLY  MEADOW VIEW HEALTH & REH	MO 63124-1900 PL MO 63124-1900  MO 64628-1300  MO 64628-0129  MO 65270-4550  GE LANE MO 65270-4550	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220 No 57 No 28019
SAINT LOUIS  Mailing Address TWO MCKNIGHT ESAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE MOBERLY  MEADOW VIEW HEALTH & REH 2203 EAST MECHANIC ST	MO 63124-1900 PL MO 63124-1900  MO 64628-1300 MO 64628-0129  MO 65270-4550 GE LANE MO 65270-4550  ABILITATION	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220 No 28019
SAINT LOUIS  Mailing Address TWO MCKNIGHT F SAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE MOBERLY  MEADOW VIEW HEALTH & REH 2203 EAST MECHANIC ST HARRISONVILLE	MO 63124-1900 PL MO 63124-1900  MO 64628-1300 MO 64628-0129  G MO 65270-4550 GE LANE MO 65270-4550  ABILITATION MO 64701-2060	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 380-2622 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220 No 28019
SAINT LOUIS  Mailing Address TWO MCKNIGHT ESAINT LOUIS  MCLARNEY HEALTHCARE 215 EAST PRATT BROOKFIELD  Mailing Address PO BOX 129 BROOKFIELD  MEADOW RIDGE SENIOR LIVING 521 MEADOW RIDGE LN MOBERLY  Mailing Address 521 MEADOW RIDGE MOBERLY  MEADOW VIEW HEALTH & REH 2203 EAST MECHANIC ST	MO 63124-1900 PL MO 63124-1900  MO 64628-1300 MO 64628-0129  G MO 65270-4550 GE LANE MO 65270-4550  ABILITATION MO 64701-2060	Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare  Telephone (660) 258-7482 Level of Care: SNF County LINN Region 5 Medicare/Medicaid  Telephone (660) 263-0550 Level of Care: ALF** County RANDOLPH Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	70 No 18914 No 60 No 05220 No 28019

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MEADOWNDOOK DEGIDENWAY	CARE DIG			
MEADOWBROOK RESIDENTIAL O	CARE, INC	T 1 1 2 (572) 546 7065	A1 1	NT
806 WEST MULBERRY	MO 50550	<b>Telephone</b> (573) 546-7065	Alzheimer's Unit	No
PILOT KNOB	MO 63663-	Level of Care: ALF**	Bed Capacity	36
Mailing Address PO BOX 510		County IRON	DMH Licensed	No
PILOT KNOB	MO 63663-0510	Region 2	Facility Number	20513
MEADOWVIEW MEMORY CARE				
555 WOODLAND VILLAS LANE		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	Yes
	MO 62010 2011	• '		24
ARNOLD	MO 63010-2011		Bed Capacity	
Mailing Address 555 WOODLAND VI		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2011	Region 2	Facility Number	12549
MEDICALODGES BUTLER				
103 EAST NURSERY		<b>Telephone</b> (660) 679-3179	Alzheimer's Unit	Yes
BUTLER	MO 64730-2331	Level of Care: SNF	Bed Capacity	110
Mailing Address 103 EAST NURSERY		County BATES	DMH Licensed	No
BUTLER	MO 64730-2331	•		
DUILER	MO 04/30-2331	Region 3 Medicare/Medicaid	Facility Number	05319
MEDICALODGES NEOSHO				
400 LYON DR		<b>Telephone</b> (417) 451-2544	Alzheimer's Unit	Yes
NEOSHO	MO 64850-9194	Level of Care: SNF	Bed Capacity	114
Mailing Address 400 LYON DR		County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-9194	Region 1 Medicare/Medicaid	Facility Number	05383
		Treateure Areateure		00000
MEDICALODGES NEVADA				
1210 W ASHLAND ST		<b>Telephone</b> (417) 667-5064	Alzheimer's Unit	No
NEVADA	MO 64772-1906	Level of Care: SNF	Bed Capacity	100
Mailing Address 1210 W ASHLAND S	ST	County VERNON	DMH Licensed	No
NEVADA	MO 64772-1906	Region 1 Medicare/Medicaid	Facility Number	05717
MELODY HOUSE				
3031 SOUTH TEN MILE DR		<b>Telephone</b> (573) 893-7228	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-6816	Level of Care: RCF*	Bed Capacity	15
Mailing Address 3031 S TEN MILE DI		County COLE	DMH Licensed	Yes
JEFFERSON CITY	MO 65109-6816		Facility Number	14376
JETTERSON CIT I	WO 03109-0010	Region 6	Facility Number	14370
MEMORY LANE OF DEXTER				
415 S CATALPA STREET		<b>Telephone</b> (573) 624-7491	Alzheimer's Unit	Yes
DEXTER	MO 63841-2017	Level of Care: SNF	Bed Capacity	73
Mailing Address 415 S CATALPA STR	REET	County STODDARD	DMH Licensed	No
DEXTER	MO 63841-2017	Region 2 Medicare/Medicaid	Facility Number	02156
MERAMEC NURSING CENTER 940 MATTOX DR		<b>Telephone</b> (573) 468-7733	Alzheimer's Unit	No
SULLIVAN	MO 63080-2364	Level of Care: SNF	Bed Capacity	60
Mailing Address 940 MATTOX DR		County CRAWFORD	DMH Licensed	No
SULLIVAN	MO 63080-2364	•	Facility Number	18277
SCELIVAL	1110 U3UUU-23UT	Region 6 Medicare/Medicaid	racinty rannoci	104//

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MEYER CARE CENTER		T. L. L. (660) 594 4004	A1 1	N
1201 WEST 19TH ST	MO 64037-1458	Telephone (660) 584-4224 Level of Care: ALF**	Alzheimer's Unit	No 20
HIGGINSVILLE  Mailing Address 1201 WEST 19TH ST			Bed Capacity DMH Licensed	39 No
HIGGINSVILLE	MO 64037-1458	County LAFAYETTE  Region 3	Facility Number	05326
HIGGINS VILLE	WO 04037-1438	Region 3	Facility Number	03326
MEYER CARE CENTER				
1201 WEST 19TH ST		<b>Telephone</b> (660) 584-4224	Alzheimer's Unit	No
HIGGINSVILLE	MO 64037-1458	Level of Care: SNF	Bed Capacity	56
Mailing Address 1201 WEST 19TH ST		County LAFAYETTE	DMH Licensed	No
HIGGINSVILLE	MO 64037-1458	Region 3 Medicare/Medicaid	Facility Number	05326
MILAN HEALTH CARE CENTER		Tolonhone (660) 265 4022	Alahaiman'a Unit	No
52435 INFIRMARY RD	MO 63556-2874	Telephone (660) 265-4032 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 100
MILAN Mailing Address 52435 INFIRMARY F		County SULLIVAN	DMH Licensed	No
MILAN	MO 63556-2874	·	Facility Number	
MILAN	MO 03330-2874	Region 5 Medicare/Medicaid	racinty Number	05418
MILL CREEK VILLAGE-ASSISTED	LIVING BY AMERICARE			
1990 W SOUTHAMPTON DR		<b>Telephone</b> (573) 381-2510	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-6238	Level of Care: ALF**	Bed Capacity	50
Mailing Address 1990 W SOUTHAMP	TON DR	County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-6238	Region 6	Facility Number	30107
MILLER COUNTY CARE AND REH	ADII ITATION CENTED			
1157 HIGHWAY 17	ABILITATION CENTER	<b>Telephone</b> (573) 369-2318	Alzheimer's Unit	Yes
TUSCUMBIA	MO 65082-2100	Level of Care: SNF	Bed Capacity	86
Mailing Address 1157 HWY 17	1110 00002 2100	County MILLER	DMH Licensed	No
TUSCUMBIA	MO 65082-2100	Region 6 Medicare/Medicaid	Facility Number	05422
MILLER RESIDENT CARE, INC				
210 ROCK RD		<b>Telephone</b> (660) 327-5680	Alzheimer's Unit	No
PARIS	MO 65275-1282	Level of Care: RCF*	Bed Capacity	40
Mailing Address 210 ROCK RD	1.0	County MONROE	DMH Licensed	No
PARIS	MO 65275-1282	Region 5	Facility Number	18026
MINGO RESIDENTIAL CARE FACI	LITY			
24080 STATE HWY 51		<b>Telephone</b> (573) 222-3086	Alzheimer's Unit	No
PUXICO	MO 63960-8114	Level of Care: RCF*	Bed Capacity	36
Mailing Address 24080 STATE HWY	51	County STODDARD	DMH Licensed	Yes
PUXICO	MO 63960-8114	Region 2	Facility Number	24959
MOCKINGBIRD MANOR RESIDEN	TIAL CARE			
227 W FRANKLIN		<b>Telephone</b> (816) 781-8058	Alzheimer's Unit	No
LIBERTY	MO 64068-1641	Level of Care: RCF*	Bed Capacity	16
Mailing Address PO BOX 121		County CLAY	DMH Licensed	Yes
· · · · · · · · · · · · · · · · · · ·	1.0 (10.00 0101		T	

**Facility Number** 

05450

MO 64069-0121

LIBERTY

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MONITEAU CARE CENTER			TEMPORARY CLOS	SURE - STAFFING	
200 SOUTH GERHART		Telephone	(573) 796-3822	Alzheimer's Unit	No
CALIFORNIA M	4O 65018-2433	Level of Care:	SNF	<b>Bed Capacity</b>	60
Mailing Address 200 S GERHART		County MC	NITEAU	DMH Licensed	No
CALIFORNIA M	4O 65018-2433	Region 6	Medicare/Medicaid	<b>Facility Number</b>	20884
MONROE CITY MANOR CARE CENT	ER				
1010 HIGHWAY 24 & 36 EAST		Telephone	(573) 735-4850	Alzheimer's Unit	No
MONROE CITY M	4O 63456-1116	Level of Care:	SNF	Bed Capacity	60
Mailing Address 1010 HWY 24 & 36 EAS	T	County MA	RION	DMH Licensed	No
_	MO 63456-1116	Region 5	Medicare/Medicaid	Facility Number	05473
MONDOE MANOR					
MONROE MANOR 200 SOUTH ST		Telephone	(660) 327-4125	Alzheimer's Unit	Yes
	MO 65275-1165	Level of Care:	SNF	Bed Capacity	119
Mailing Address 200 SOUTH ST	10 03273 1103		NROE	DMH Licensed	No
o .	4O 65275-1165	·	Medicare/Medicaid	Facility Number	05484
17 IKIS	10 03273 1103	Region 5	vieuicai e/ivieuicaiu	racinty runner	03464
MONTEREY PARK REHABILITATION	N & HEAT TH CARE CENTER				
4600 LITTLE BLUE PARKWAY	CARE CENTER	Telephone	(816) 795-7888	Alzheimer's Unit	No
	4O 64057-8302	Level of Care:	SNF	Bed Capacity	122
Mailing Address 4600 LITTLE BLUE PRE			CKSON	DMH Licensed	No
_	4O 64057-8302		Medicare/Medicaid	Facility Number	15987
INDELENBERGE IV	10 04037 0302	Region 5	viedicai e/iviedicaid	racinty Number	13907
MONTICELLO HOUSE					
1115 K LAND DR		Telephone	(573) 243-8989	Alzheimer's Unit	No
	4O 63755-2588	Level of Care:	RCF*	Bed Capacity	32
Mailing Address PO BOX 740	10 007,00 2000		PE GIRARDEAU	DMH Licensed	No
_	4O 63755-0740	Region 2		Facility Number	14454
		Region 2		Tuesting Transpor	14454
MONTICELLO HOUSE					
1115 K LAND DR		Telephone	(573) 243-8989	Alzheimer's Unit	Yes
JACKSON M	4O 63755-2588	Level of Care:	SNF	Bed Capacity	105
Mailing Address PO BOX 740		County CA	PE GIRARDEAU	DMH Licensed	No
JACKSON M	MO 63755-0740	Region 2	Medicare/Medicaid	Facility Number	14454
MOORE-FEW CARE CENTER					
901 SOUTH ADAMS		Telephone	(417) 448-3841	Alzheimer's Unit	No
NEVADA M	4O 64772-3209	Level of Care:	SNF	Bed Capacity	108
Mailing Address 901 SOUTH ADAMS		County VE	RNON	DMH Licensed	No
NEVADA M	AO 64772-3209	Region 1	Medicare/Medicaid	Facility Number	05703
MOOREVIEW RESIDENTIAL		T-11	(660) 420 1505	Alabata da Trito	3.7
130 WEST CULTON	AO (4002-1720	Telephone	(660) 429-1587	Alzheimer's Unit	No 20
	4O 64093-1720	Level of Care:	RCF	Bed Capacity	20 V
Mailing Address 130 WEST CULTON	AO (4002-1720	•	HNSON	DMH Licensed	Yes
WARRENSBURG M	4O 64093-1720	Region 3		Facility Number	11225

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MORNINGSIDE CENTER			
1700 MORNINGSIDE DR	<b>Telephone</b> (660) 646-0170	Alzheimer's Unit	No
CHILLICOTHE MO 64601-1545	Level of Care: SNF	Bed Capacity	60
Mailing Address 1700 MORNINGSIDE DR	County LIVINGSTON	DMH Licensed	No
CHILLICOTHE MO 64601-1545	Region 4 Medicare/Medicaid	Facility Number	05557
MORNINGSIDE CENTER ASSISTED LIVING APARTMENTS			
1702 MORNINGSIDE DR	<b>Telephone</b> (660) 646-0170	Alzheimer's Unit	No
CHILLICOTHE MO 64601-1545	Level of Care: ALF	Bed Capacity	31
Mailing Address 1702 MORNINGSIDE DR	County LIVINGSTON	DMH Licensed	No
CHILLICOTHE MO 64601-1545	Region 4	<b>Facility Number</b>	05557
MOTHER OF GOOD COUNSEL HOME			
6825 NATURAL BRIDGE RD	<b>Telephone</b> (314) 383-4765	Alzheimer's Unit	No
SAINT LOUIS MO 63121-5314	Level of Care: SNF	Bed Capacity	114
Mailing Address 6825 NATURAL BRIDGE RD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63121-5314	Region 7	Facility Number	05568
	and the second s	•	00000
MOTHER OF PERPETUAL HELP RESIDENCE, INC			
7609 WATSON ROAD	<b>Telephone</b> (314) 918-2260	Alzheimer's Unit	Yes
SAINT LOUIS MO 63119-5001	Level of Care: ALF**	Bed Capacity	160
Mailing Address 7609 WATSON ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63119-5001	Region 7	Facility Number	21111
MOUNT CARMEL SENIOR LIVING - ST CHARLES, LLC			
MOUNT CARMEL SENIOR LIVING - ST CHARLES, LLC 723 FIRST CAPITOL DR	<b>Telephone</b> (636) 946-4140	Alzheimer's Unit	No
	Telephone (636) 946-4140 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 110
723 FIRST CAPITOL DR	•		
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729	Level of Care: SNF	Bed Capacity	110
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729	Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed	110 No
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed	110 No 07560
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729	Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	110 No
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 07560 No 105
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	110 No 07560 No
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 07560 No 105 No
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376 Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376 Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 07560 No 105 No 15542
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  Mailing Address 4739 COTE BRILLIANTE AVE	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF County SAINT LOUIS CITY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	110 No 07560 No 105 No 15542 No 6 Yes
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729 Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376 Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	110 No 07560 No 105 No 15542
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  Mailing Address 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  MT VERNON PLACE CARE CENTER, INC	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542 No 6 Yes 10889
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  Mailing Address 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  MT VERNON PLACE CARE CENTER, INC 1425 SOUTH LANDRUM	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542 No 6 Yes 10889
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  Mailing Address 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  MT VERNON PLACE CARE CENTER, INC 1425 SOUTH LANDRUM MT VERNON MO 65712-1912	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF County SAINT LOUIS CITY Region 7  Telephone (417) 466-2260 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542 No 6 Yes 10889
723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  Mailing Address 723 FIRST CAPITOL DR SAINT CHARLES MO 63301-2729  MOUNTAIN VIEW HEALTHCARE 1211 NORTH ASH ST MOUNTAIN VIEW MO 65548-7376  Mailing Address PO BOX 879 MOUNTAIN VIEW MO 65548-0879  MS B'S BLESSINGS 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  Mailing Address 4739 COTE BRILLIANTE AVE SAINT LOUIS MO 63113-1813  MT VERNON PLACE CARE CENTER, INC 1425 SOUTH LANDRUM	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (417) 934-6818 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid  Telephone (314) 533-1922 Level of Care: RCF County SAINT LOUIS CITY Region 7	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	110 No 07560 No 105 No 15542 No 6 Yes 10889

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MY PLACE RESIDENTIAL CARE, L.C.			
23 NORTH SIXTH ST	<b>Telephone</b> (636) 933-1793	Alzheimer's Unit	No
FESTUS MO 63028-1301	Level of Care: ALF	Bed Capacity	44
Mailing Address 23 NORTH SIXTH ST	County JEFFERSON	DMH Licensed	Yes
FESTUS MO 63028-1301	Region 2	Facility Number	10631
AND A CRITICAL WAY			
MY PLACE TOO, INC			
1107 CLARKE ST	<b>Telephone</b> (636) 586-7871	Alzheimer's Unit	No
DE SOTO MO 63020-2709	Level of Care: RCF*	Bed Capacity	50
Mailing Address 1107 CLARKE ST	County JEFFERSON	DMH Licensed	Yes
DE SOTO MO 63020-2709	Region 2	Facility Number	16234
MAZEDO MUDOINO O CONIZAL ESCIENTE CENTRED			
MYERS NURSING & CONVALESCENT CENTER	T-l (916) 221 2190	A 1-1	NI.
2315 WALROND AVE	<b>Telephone</b> (816) 231-3180	Alzheimer's Unit	No
KANSAS CITY MO 64127-4210	Level of Care: ICF	Bed Capacity	84
Mailing Address 2315 WALROND AVE	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64127-4210	Region 3 Medicaid	Facility Number	05626
NATHAN RICHARD HEALTH CARE CENTER			
700 EAST HIGHLAND AVE	<b>Telephone</b> (417) 667-8889	Alzheimer's Unit	No
NEVADA MO 64772-1025	Level of Care: SNF	Bed Capacity	68
Mailing Address 700 EAST HIGHLAND AVE	County VERNON	DMH Licensed	No
NEVADA MO 64772-1025	Region 1 Medicare/Medicaid	Facility Number	18210
NEVADA NO 04/12-1025	Region 1 Medicare/Medicaid	racinty Number	16210
NAZARETH LIVING CENTER			
2 NAZARETH LN	<b>Telephone</b> (314) 487-3950	Alzheimer's Unit	No
SAINT LOUIS MO 63129-7600	Level of Care: SNF	<b>Bed Capacity</b>	121
Mailing Address 2 NAZARETH LN	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63129-7600	Region 7 Medicare/Medicaid	Facility Number	17458
NA SA DESINA WAYNE CONTROL			
NAZARETH LIVING CENTER	T. 1 (211) 107 2070		
2 NAZARETH LN	<b>Telephone</b> (314) 487-3950	Alzheimer's Unit	Yes
SAINT LOUIS MO 63129-7600	Level of Care: ALF**	Bed Capacity	114
Mailing Address 2 NAZARETH LN	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 63129-7600	Region 7	Facility Number	17458
NEIGHBORHOODS AT QUAIL CREEK, THE			
1514 WEST LARK	<b>Telephone</b> (417) 889-1275	Alzheimer's Unit	Yes
	•		
SPRINGFIELD MO 65810-2270	Level of Care: SNF	Bed Capacity	120
Mailing Address 1514 WEST LARK	County GREENE	DMH Licensed	No
SPRINGFIELD MO 65810-2270	Region 1 Medicare/Medicaid	Facility Number	24701
NEIGHBORHOODS REHABILITATION & SKILLED NURSING BY	TIGERPLACE, THE		
3003 FALLING LEAF COURT	<b>Telephone</b> (573) 256-4620	Alzheimer's Unit	No
COLUMBIA MO 65201-3549	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 3003 FALLING LEAF COURT	County BOONE	DMH Licensed	No
	•		
COLUMBIA MO 65201-3549	Region 6 Medicare/Medicaid	Facility Number	24341

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NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		<b>Telephone</b> (573) 237-2103	Alzheimer's Unit No
NEW HAVEN MO	63068-1300	Level of Care: ALF	<b>Bed Capacity</b> 16
Mailing Address 9503 HWY 100		County FRANKLIN	DMH Licensed No
NEW HAVEN MO	63068-1300	Region 6	Facility Number 05738
NEW HAVEN CARE CENTER			
9503 HIGHWAY 100		<b>Telephone</b> (573) 237-2103	Alzheimer's Unit No
	63068-1300	Level of Care: SNF	Bed Capacity 90
Mailing Address 9503 HWY 100	03000 1300	County FRANKLIN	DMH Licensed No
_	63068-1300		
NEW HAVEN MO	03006-1300	Region 6 Medicare/Medicaid	Facility Number 05738
NEW HOPE ASSISTED LIVING LLC			
328 NORTH NEW HOPE DRIVE		<b>Telephone</b> (573) 712-2992	Alzheimer's Unit No
	63901-4819	Level of Care: ALF	
Mailing Address 328 NORTH NEW HOPE DR		County BUTLER	DMH Licensed No
POPLAR BLUFF MO	63901-4819	Region 2	Facility Number 32690
NEW HODIZONG DCE II			
NEW HORIZONS RCF II		m 1 1 (572) 757 0427	
5858 BUSIEK ROAD	-2	<b>Telephone</b> (573) 756-2426	Alzheimer's Unit No
	63640-7325	Level of Care: ALF	<b>Bed Capacity</b> 15
Mailing Address PO BOX 510		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON MO	63640-0510	Region 2	Facility Number 14868
NEW MADDID I WING CENTED			
NEW MADRID LIVING CENTER		T-1	Al-L-d
1050 DAWSON RD	620.60 111.6	<b>Telephone</b> (573) 748-5622	Alzheimer's Unit Yes
	63869-1116	Level of Care: SNF	Bed Capacity 112
Mailing Address 1050 DAWSON RD		County NEW MADRID	DMH Licensed No
NEW MADRID MO	63869-1116	Region 2 Medicare/Medicaid	Facility Number 04952
NEW MARK CARE CENTER			
11221 NORTH NASHUA DR		<b>Telephone</b> (816) 734-4433	Alzheimer's Unit Yes
	64155 1150	• ' '	
	64155-1159	Level of Care: SNF	
Mailing Address 11221 N NASHUA DR	-11 11-0	County CLAY	DMH Licensed No
KANSAS CITY MO	64155-1159	Region 4 Medicare/Medicaid	Facility Number 12688
NEWSTEAD PLACE			
19 NORTH NEWSTEAD		<b>Telephone</b> (314) 286-4510	Alzheimer's Unit No
	63108-2260	Level of Care: RCF*	Bed Capacity 20
	03100-2200		
Mailing Address 19 N NEWSTEAD	62100 2260	•	
SAINT LOUIS MO	63108-2260	Region 7	Facility Number 19169
NHC HEALTHCARE, DESLOGE			
801 BRIM ST		<b>Telephone</b> (573) 431-0223	Alzheimer's Unit Yes
	63601-3441	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX AA	-	County SAINT FRANCOIS	DMH Licensed No
-	63601-0568	Region 2 Medicare/Medicaid	Facility Number 02143
NIO WIO	32331 0200	region = Miculcare/Miculcalu	- memory 1.10mmer 02145

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NHC HEALTHCARE, JOPLIN 2700 EAST 34TH ST JOPLIN Mailing Address 2700 EAST 34TH ST JOPLIN	MO 64804-4310 MO 64803-2877	Telephone (417) 781-1737 Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 126 DMH Licensed No Facility Number 04044
NHC HEALTHCARE, KENNETT 1120 FALCON KENNETT Mailing Address PO BOX 696 KENNETT	MO 63857-3825 MO 63857-0696	Telephone (573) 888-1150 Level of Care: SNF County DUNKLIN Region 2 Medicare/Medicaid	Alzheimer's Unit Yes Bed Capacity 170 DMH Licensed No Facility Number 04268
NHC HEALTHCARE, MARYLAND 2920 FEE FEE RD MARYLAND HEIGHTS Mailing Address 2920 FEE FEE RD MARYLAND HEIGHTS	MO 63043-1915 MO 63043-1915	Telephone (314) 291-0121 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Alzheimer's Unit Bed Capacity  DMH Licensed Facility Number  Yes  220  08272
NHC HEALTHCARE, ST CHARLES 35 SUGAR MAPLE LN SAINT CHARLES Mailing Address 35 SUGAR MAPLE I SAINT CHARLES	MO 63303-5740	Telephone (636) 946-8887 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 120 DMH Licensed No Facility Number 07503
NHC HEALTHCARE, WEST PLAIN 211 DAVIS DR WEST PLAINS Mailing Address PO BOX 497 WEST PLAINS	MO 65775-2242 MO 65775-0497	Telephone (417) 256-0798 Level of Care: SNF County HOWELL Region 1 Medicare/Medicaid	Alzheimer's Unit Yes Bed Capacity 114 DMH Licensed No Facility Number 08434
NICK'S HEALTH CARE CENTER, I 253 EAST HIGHWAY 116 PLATTSBURG Mailing Address 253 EAST HWY 116 PLATTSBURG	MO 64477-1561	Telephone (816) 539-2376 Level of Care: SNF County CLINTON Region 4 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 70 DMH Licensed No Facility Number 22058
NIXA NURSING & REHAB 1104 NORTH MAIN ST NIXA Mailing Address 1104 N MAIN ST NIXA	MO 65714-9316 MO 65714-9316	Telephone (417) 725-1777 Level of Care: SNF County CHRISTIAN Region 1 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 82 DMH Licensed No Facility Number 13840
NODAWAY HEALTHCARE 22371 STATE HIGHWAY 46 MARYVILLE Mailing Address PO BOX 307 MARYVILLE	MO 64468-8157 MO 64468-0307	Telephone (660) 562-2876 Level of Care: SNF County NODAWAY Region 4 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 60 DMH Licensed No Facility Number 05766

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NORMANDY NURSING CENTER				
7301 SAINT CHARLES ROCK RD		<b>Telephone</b> (314) 862-0555	Alzheimer's Unit	No
SAINT LOUIS	MO 63133-1737	Level of Care: SNF	Bed Capacity	116
Mailing Address 7301 SAINT CHARL		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63133-1737	Region 7 Medicare/Medicaid	Facility Number	01118
NORTERRE		(01.6) 470 4702		
2555 NORTERRE CIRCLE	NO 64060 2212	<b>Telephone</b> (816) 479-4793	Alzheimer's Unit	No
LIBERTY	MO 64068-3313	Level of Care: SNF	Bed Capacity	60
Mailing Address 2555 NORTERRE CI		County CLAY	DMH Licensed	No
LIBERTY	MO 64086-3313	Region 4 Medicare/Medicaid	Facility Number	31005
NORTERRE				
2580 NORTERRE CIRCLE		<b>Telephone</b> (816) 479-4793	Alzheimer's Unit	Yes
LIBERTY	MO 64068-3412	Level of Care: ALF**	Bed Capacity	60
Mailing Address 2580 NORTERRE CI		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-3412	Region 4	Facility Number	31005
EIDEKT I	110 01000 3112	Region	ruenity rumber	31003
NORTH VILLAGE PARK				
2041 SILVA LN		<b>Telephone</b> (660) 269-7300	Alzheimer's Unit	No
MOBERLY	MO 65270-3658	Level of Care: SNF	Bed Capacity	184
Mailing Address 2041 SILVA LN		County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-3658	Region 5 Medicare/Medicaid	<b>Facility Number</b>	06481
NORTHLAND REHABILITATION	& HEALTH CARE CENTER			
NORTHLAND REHABILITATION & 4301 NE PARVIN ROAD	& HEALTH CARE CENTER	<b>Telephone</b> (816) 702-8000	Alzheimer's Unit	No
	& HEALTH CARE CENTER  MO 64117-3001	Telephone (816) 702-8000 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 118
4301 NE PARVIN ROAD	MO 64117-3001	• '	Bed Capacity DMH Licensed	
4301 NE PARVIN ROAD KANSAS CITY	MO 64117-3001	Level of Care: SNF	<b>Bed Capacity</b>	118
4301 NE PARVIN ROAD KANSAS CITY <b>Mailing Address</b> 4301 NE PARVIN RO KANSAS CITY	MO 64117-3001 DAD MO 64117-3001	Level of Care: SNF County CLAY	Bed Capacity DMH Licensed	118 No
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN RO KANSAS CITY NORTHPARK VILLAGE - ASSISTE	MO 64117-3001 DAD MO 64117-3001	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	118 No 31230
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN RO KANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN	MO 64117-3001 DAD MO 64117-3001 ED LIVING BY AMERICARE	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	118 No 31230 No
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN RO KANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK	MO 64117-3001 DAD MO 64117-3001 ED LIVING BY AMERICARE MO 65721-7221	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	118 No 31230 No 52
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGH	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	118 No 31230 No 52 No
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN RO KANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK	MO 64117-3001 DAD MO 64117-3001 ED LIVING BY AMERICARE MO 65721-7221	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	118 No 31230 No 52
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGH	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	118 No 31230 No 52 No
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGH OZARK	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	118 No 31230 No 52 No
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221 D LIVING BY AMERICARE	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221 D LIVING BY AMERICARE	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	118 No 31230 No 52 No 20003
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN RO KANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGH OZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON Mailing Address 1500 LYNN ST LEBANON	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221  P LIVING BY AMERICARE  MO 65536-4409	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF** County LACLEDE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	118 No 31230 No 52 No 20003
4301 NE PARVIN ROAD KANSAS CITY Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON Mailing Address 1500 LYNN ST LEBANON NORTHVIEW VILLAGE	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221  P LIVING BY AMERICARE  MO 65536-4409	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF** County LACLEDE Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003 Yes 50 No 20525
4301 NE PARVIN ROAD KANSAS CITY  Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK  Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON  Mailing Address 1500 LYNN ST LEBANON  NORTHVIEW VILLAGE 2415 NORTH KINGSHIGHWAY	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221  PLIVING BY AMERICARE  MO 65536-4409  MO 65536-4409	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF** County LACLEDE Region 1  Telephone (314) 361-1300	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003 Yes 50 No 20525
4301 NE PARVIN ROAD KANSAS CITY  Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK  Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON  Mailing Address 1500 LYNN ST LEBANON  NORTHVIEW VILLAGE 2415 NORTH KINGSHIGHWAY SAINT LOUIS	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221  PLIVING BY AMERICARE  MO 65536-4409  MO 65536-4409  MO 63113-1109	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF** County LACLEDE Region 1  Telephone (314) 361-1300 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003 Yes 50 No 20525
4301 NE PARVIN ROAD KANSAS CITY  Mailing Address 4301 NE PARVIN ROKANSAS CITY  NORTHPARK VILLAGE - ASSISTE 4449 N STATE HIGHWAY NN OZARK  Mailing Address 4449 N STATE HIGHOZARK  NORTHRIDGE PLACE - ASSISTED 1500 LYNN ST LEBANON  Mailing Address 1500 LYNN ST LEBANON  NORTHVIEW VILLAGE 2415 NORTH KINGSHIGHWAY	MO 64117-3001 DAD MO 64117-3001  ED LIVING BY AMERICARE  MO 65721-7221 HWAY NN MO 65721-7221  PLIVING BY AMERICARE  MO 65536-4409  MO 65536-4409  MO 63113-1109	Level of Care: SNF County CLAY Region 4 Medicare/Medicaid  Telephone (417) 581-3200 Level of Care: ALF** County CHRISTIAN Region 1  Telephone (417) 532-9793 Level of Care: ALF** County LACLEDE Region 1  Telephone (314) 361-1300	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	118 No 31230 No 52 No 20003 Yes 50 No 20525

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NORTHWOOD HILLS CARE CEN	TER			
800 NORTH ARTHUR ST		<b>Telephone</b> (417) 754-2208	Alzheimer's Unit	Yes
HUMANSVILLE	MO 65674-8655	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 187		County POLK	DMH Licensed	No
HUMANSVILLE	MO 65674-0187	Region 1 Medicare/Medicaid	Facility Number 1	0607
OAK KNOLL SKILLED NURSING	& DEHARII ITATION CENTED			
37 N CLARK AVE	W REMINIETT TO TO CENTER	<b>Telephone</b> (314) 521-7419	Alzheimer's Unit	No
FERGUSON	MO 63135-2323	Level of Care: SNF	Bed Capacity	72
Mailing Address 37 N CLARK AVE	110 03133 2323	County SAINT LOUIS COUNTY	DMH Licensed	No
FERGUSON	MO 63135-2323	Region 7 Medicare/Medicaid		5864
OAK PARK CARE CENTER				
6637 BERTHOLD AVE		<b>Telephone</b> (314) 781-3444	Alzheimer's Unit	No
SAINT LOUIS	MO 63139-3318	Level of Care: SNF	Bed Capacity	120
Mailing Address 6637 BERTHOLD A		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63139-3318	Region 7 Medicare/Medicaid		5914
SARVI EOORS	WO 03137 3310	Region / Medicale/Medicalu	racinty (uniber	3914
OAK POINTE OF CARTHAGE				
300 W AIRPORT DR		<b>Telephone</b> (417) 358-3355	Alzheimer's Unit	Yes
CARTHAGE	MO 64836-3511	Level of Care: ALF**	Bed Capacity	55
Mailing Address 300 W AIRPORT DI	R	County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3511	Region 1	Facility Number 3	0168
OAK POINTE OF KEARNEY		m		
200 MEADOWBROOK DR	1.0	<b>Telephone</b> (816) 628-0075	Alzheimer's Unit	Yes
KEARNEY	MO 64060-8788	Level of Care: ALF**	Bed Capacity	55
Mailing Address 200 MEADOWBRO		County CLAY	DMH Licensed	No
KEARNEY	MO 64060-8788	Region 4	Facility Number 2	9803
OAK POINTE OF MARYVILLE				
817 SOUTH COUNTRY CLUB DR		<b>Telephone</b> (660) 562-2799	Alzheimer's Unit	Yes
MARYVILLE	MO 64468-1477	Level of Care: ALF**	Bed Capacity	55
Mailing Address 817 SOUTH COUNT	ΓRY CLUB DR	County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-1477	Region 4	Facility Number 2	9544
OAK POINTE OF MONETT				
1011 OLD AIRPORT ROAD		<b>Telephone</b> (417) 235-3500	Alzheimer's Unit	Yes
MONETT	MO 65708-1375	Telephone (417) 235-3500 Level of Care: ALF**		55
		County LAWRENCE	Bed Capacity DMH Licensed	No
Mailing Address 1011 OLD AIRPOR' MONETT		·		
MONETI	MO 65708-1375	Region 1	racinty Number 3	0206
OAK POINTE OF NEOSHO				
2601 OAK RIDGE EXTENSION		<b>Telephone</b> (417) 451-8872	Alzheimer's Unit	Yes
NEOSHO	MO 64850-7765	Level of Care: ALF**	Bed Capacity	55
Mailing Address 2601 OAK RIDGE E	EXTENSION	County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-7765	Region 1	Facility Number 2	9972

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OAK POINTE OF ROLLA			
1000 EAST LIONS CLUB DRIVE		<b>Telephone</b> (573) 426-2186	Alzheimer's Unit Yes
ROLLA	MO 65401-4356	Level of Care: ALF**	
Mailing Address 1000 EAST LIONS CI			DMH Licensed No
ROLLA	MO 65401-4356	Region 6	Facility Number 31216
OAK POINTE OF WARRENTON			
700 FORREST AVE		<b>Telephone</b> (636) 456-6464	Alzheimer's Unit Yes
WARRENTON	MO 63383-7040	Level of Care: ALF**	Bed Capacity 71
Mailing Address 700 FORREST AVE	110 00000 7010	County WARREN	DMH Licensed No
WARRENTON	MO 63383-7040	Region 6	Facility Number 25045
WARRENTON	WO 03383-7040	kegion 0	Facility Number 23043
OAK POINTE OF WASHINGTON			
1650 HIGH STREET		<b>Telephone</b> (636) 390-3290	Alzheimer's Unit Yes
WASHINGTON	MO 63090-4354	Level of Care: ALF**	Bed Capacity 65
Mailing Address 1650 HIGH STREET		County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4354	Region 6	Facility Number 32114
		Region 5	22111
OAK RIDGE ASSISTED LIVING			
403 CRISPIN ST		<b>Telephone</b> (816) 776-3435	Alzheimer's Unit Yes
RICHMOND	MO 64085-1212	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 403 CRISPIN ST		County RAY	<b>DMH Licensed</b> No
RICHMOND	MO 64085-1212	Region 4	Facility Number 29711
OAKDALE CARE CENTER			
2702 DEBBIE LN		<b>Telephone</b> (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: ALF	Bed Capacity 60
Mailing Address 2702 DEBBIE LN	MO 03901 2030	County BUTLER	DMH Licensed No
•	MO 63901-2650	•	
POPLAR BLUFF	MO 03901-2030	Region 2	Facility Number 18157
OAKDALE CARE CENTER			
2702 DEBBIE LN		<b>Telephone</b> (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2650	Level of Care: RCF*	<b>Bed Capacity</b> 36
Mailing Address 2702 DEBBIE LN		County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-2650	Region 2	Facility Number 18157
OAKDALE CARE CENTER			
2702 DEBBIE LN		<b>Telephone</b> (573) 686-5242	Alzheimer's Unit No
POPLAR BLUFF	MO 62001 2650		
	MO 63901-2650	Level of Care: SNF	
Mailing Address 2702 DEBBIE LN	MO 62001 2650	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-2650	Region 2 Medicare/Medicaid	Facility Number 18157
OAKRIDGE OF PLATTSBURG			
205 EAST CLAY AVE		<b>Telephone</b> (816) 539-2128	Alzheimer's Unit No
PLATTSBURG	MO 64477-8100	Level of Care: SNF	<b>Bed Capacity</b> 60
PLATTSBURG Mailing Address PO BOX 247	MO 64477-8100		<b>Bed Capacity</b> 60 <b>DMH Licensed</b> No
	MO 64477-8100 MO 64477-0247	Level of Care: SNF	

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OAKS COTTAGE ASSISTED LIVING 5448 N 2ND AVENUE	G, THE	<b>Telephone</b> (417) 581-0330	Alzheimer's Unit	Yes
OZARK	MO 65721-6210	Level of Care: ALF**	<b>Bed Capacity</b>	12
Mailing Address 5448 N 2ND AVENU	Е	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-6210	Region 1	Facility Number	31804
			·	
OAKS, THE				
5550 NOLAND ROAD		<b>Telephone</b> (816) 356-0200	Alzheimer's Unit	No
KANSAS CITY	MO 64133-3685	Level of Care: RCF	Bed Capacity	62
Mailing Address 5550 NOLAND RD	WO 04133 3003	County JACKSON	DMH Licensed	Yes
e e e e e e e e e e e e e e e e e e e	MO (4122 2695			
KANSAS CITY	MO 64133-3685	Region 3	Facility Number	13440
OAKWOOD ESTATES NURSING &	REHAB			
5303 BERMUDA DR		<b>Telephone</b> (314) 385-0910	Alzheimer's Unit	Yes
NORMANDY	MO 63121-1407	Level of Care: SNF	Bed Capacity	115
Mailing Address 5303 BERMUDA DR		County SAINT LOUIS COUNTY	DMH Licensed	No
NORMANDY	MO 63121-1407	Region 7 Medicare/Medicaid	Facility Number	01238
NORMEND I	110 03121 1107	Region / Medicare/Medicard	Tuelley Tulliser	01236
OASIS RESIDENTIAL CARE FACIL	ITY			
3508 PRAIRIE AVE		<b>Telephone</b> (314) 534-3355	Alzheimer's Unit	No
SAINT LOUIS	MO 63107-2214	Level of Care: RCF*	Bed Capacity	20
Mailing Address 3508 PRAIRIE AVE		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63107-2214	Region 7	Facility Number	15415
SAIRT EOOB	NIO 03107 2214	Region /	racinty runner	15415
OREGON HEALTHCARE				
501 MONROE		<b>Telephone</b> (660) 446-3355	Alzheimer's Unit	No
OREGON	MO 64473-7800	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 19		County HOLT	DMH Licensed	No
OREGON	MO 64473-0019	Region 4 Medicare/Medicaid	Facility Number	06097
		5	•	
ORILLA'S WAY				
1209 SOUTH HIGH ST		<b>Telephone</b> (660) 564-2204	Alzheimer's Unit	No
GRANT CITY	MO 64456-0056	Level of Care: ALF**	Bed Capacity	37
Mailing Address PO BOX 56		County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-0056	Region 4	Facility Number	08591
001000000000000000000000000000000000000				
OSAGE BEACH REHABILITATION	AND HEALTH CARE CENTER			
844 PASSOVER RD		<b>Telephone</b> (573) 348-2225	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-2834	Level of Care: SNF	Bed Capacity	94
Mailing Address 844 PASSOVER RD		County CAMDEN	DMH Licensed	No
OSAGE BEACH	MO 65065-2834	Region 6 Medicare/Medicaid	Facility Number	06116
OUR LADY OF MERCY COUNTRY	HOME			
2160 MERCY DR		<b>Telephone</b> (816) 781-5711	Alzheimer's Unit	No
LIBERTY	MO 64068-7955	Level of Care: RCF*		44
	WIO 04000-7333		Bed Capacity	
Mailing Address 2160 MERCY DR	MO (40(0 7055	County CLAY	DMH Licensed	No
LIBERTY	MO 64068-7955	Region 4	Facility Number	06153

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OWEN ACRES RESIDENTIAL CAR	RE FACILITY		
614 COUNTY ROAD 466		<b>Telephone</b> (573) 778-0497	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-2964	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address 614 COUNTY RD 46	56	County BUTLER	<b>DMH Licensed</b> Yes
POPLAR BLUFF	MO 63901-2964	Region 2	Facility Number 21093
OXFORD GRAND AT SHOAL CREE	FK		
8280 N TULLIS AVENUE	EK	<b>Telephone</b> (816) 781-8282	Alzheimer's Unit Yes
KANSAS CITY	MO 64158-7683	Level of Care: ALF**	Bed Capacity 98
Mailing Address 8280 N TULLIS AVE		County CLAY	DMH Licensed No
KANSAS CITY	MO 64158-7683	Region 4	Facility Number 30758
	110 01130 7003	Kegion 1	Tuelity Number 50756
OZARK MANOR			
1013 HIGHWAY Z		<b>Telephone</b> (573) 783-8338	Alzheimer's Unit No
FREDERICKTOWN	MO 63645-8035	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 1013 HIGHWAY Z		County MADISON	<b>DMH Licensed</b> No
FREDERICKTOWN	MO 63645-8035	Region 2	Facility Number 22947
OZARK NURSING & CARE CENTE	ER		
1486 NORTH RIVERSIDE RD		<b>Telephone</b> (417) 581-7126	Alzheimer's Unit No
OZARK	MO 65721-7688	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 1486 NORTH RIVER	RSIDE RD	County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-7688	Region 1 Medicare/Medicaid	Facility Number 06240
OZARK OAKS RESIDENTIAL CAR	E EACH ITY II		
3405 S SCHIFFERDECKER	E FACILII I II	<b>Telephone</b> (417) 347-7760	Alzheimer's Unit No
JOPLIN	MO 64804-1388	Level of Care: RCF*	Bed Capacity 30
Mailing Address PO BOX 2526	110 04004 1300	County NEWTON	DMH Licensed Yes
JOPLIN	MO 64803-2526	Region 1	Facility Number 13636
JOI EM	110 01003 2320	Kegion 1	rumser 13030
OZARK REHABILITATION & HEA	ALTH CARE CENTER	<b>T.</b> 1 (570) 240 4744	
1083 OZARK CARE DR		<b>Telephone</b> (573) 348-1711	Alzheimer's Unit No
OSAGE BEACH	MO 65065-3016	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 270	MO (50(5 0270	County CAMDEN	DMH Licensed No
OSAGE BEACH	MO 65065-0270	Region 6 Medicare/Medicaid	Facility Number 06217
OZARK RIVERVIEW MANOR			
1200 WEST HALL ST		<b>Telephone</b> (417) 581-6025	Alzheimer's Unit No
OZARK	MO 65721-9103	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 157		County CHRISTIAN	<b>DMH Licensed</b> No
OZARK	MO 65721-0157	Region 1 Medicare/Medicaid	Facility Number 01426
OZARKS METHODIST MANOR, TI	не		
205 SOUTH COLLEGE		<b>Telephone</b> (417) 258-2573	Alzheimer's Unit No
MARIONVILLE	MO 65705-9340	Level of Care: RCF	<b>Bed Capacity</b> 76
Mailing Address PO BOX 403		County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1	Facility Number 06273
		-	

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OZARKS METHODIST MANOR, TI	не		
205 SOUTH COLLEGE		<b>Telephone</b> (417) 258-2573	Alzheimer's Unit Yes
MARIONVILLE	MO 65705-9340	Level of Care: SNF	<b>Bed Capacity</b> 78
Mailing Address PO BOX 403		County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1 Medicare/Medicaid	Facility Number 06273
WINGOWELL	110 03703 0403	Region 1 Wedicare/Medicard	racinty radinoci 00273
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: SNF	Bed Capacity 120
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6 Medicare/Medicaid	Facility Number 12638
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: ALF**	Bed Capacity 16
Mailing Address 105 S SIXTH ST	110 03007 1320	County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	·	
PACIFIC	MO 03009-1328	Region 6	Facility Number 12638
PARC PROVENCE			
605 COEUR DE VILLE DR		<b>Telephone</b> (314) 542-2500	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-6603	Level of Care: SNF	Bed Capacity 140
Mailing Address 605 COEUR DE VIL	LE DR	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63141-6603	Region 7	Facility Number 24122
			·
PARK PLACE APARTMENTS		T. I	
1211 NORTH ASH ST		<b>Telephone</b> (417) 934-6818	Alzheimer's Unit No
MOUNTAIN VIEW	MO 65548-7376	Level of Care: ALF	Bed Capacity 18
Mailing Address PO BOX 879		County HOWELL	<b>DMH Licensed</b> No
MOUNTAIN VIEW	MO 65548-0879	Region 1	Facility Number 15542
PARK PLACE II			
2000 BOARDWALK PLACE DR		<b>Telephone</b> (636) 625-2900	Alzheimer's Unit No
O'FALLON	MO 63368-3901	Level of Care: ALF**	Bed Capacity 124
Mailing Address 2000 BOARDWALK	PLACE DR	County SAINT CHARLES	<b>DMH Licensed</b> No
O'FALLON	MO 63368-3901	Region 5	Facility Number 29016
DADKDALE MANOD CADE CENTE	T <b>D</b>		
PARKDALE MANOR CARE CENTH	Z.A.	T-1 (CCO) 592 91C1	All-beder and Tire!
814 WEST SOUTH AVE	MO (4469 2772	<b>Telephone</b> (660) 582-8161	Alzheimer's Unit No
MARYVILLE	MO 64468-2772	Level of Care: SNF	Bed Capacity 86
Mailing Address 814 W SOUTH AVE	MO (4460 0772	County NODAWAY	DMH Licensed No
MARYVILLE	MO 64468-2772	Region 4 Medicare/Medicaid	Facility Number 06308
PARKLANE CARE AND REHABILI	ITATION CENTER		
401 MAR-LE DR		<b>Telephone</b> (636) 332-9580	Alzheimer's Unit Yes
WENTZVILLE	MO 63385-1647	Level of Care: SNF	<b>Bed Capacity</b> 240
Mailing Address 401 MAR-LE DR		County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-1647	Region 5 Medicare/Medicaid	Facility Number 04883
		=	

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DADIZCIDE MANOD			
PARKSIDE MANOR 1201 HUNT AVE	<b>Telephone</b> (573) 449-1448	Alzheimer's Unit	Yes
COLUMBIA MO 65202-1367	Level of Care: SNF	Bed Capacity	120
Mailing Address 1201 HUNT AVE	County BOONE	DMH Licensed	No
COLUMBIA MO 65202-1367	Region 6 Medicare/Medicaid	Facility Number	11262
00202 100,	Region o Medicard/Medicard	1 4011109 1 (41111001	11202
PARKSIDE MANOR, LLC			
300 S SAINT CHARLES ST	<b>Telephone</b> (573) 324-9918	Alzheimer's Unit	No
BOWLING GREEN MO 63334-2221	Level of Care: ALF**	Bed Capacity	44
Mailing Address 300 S SAINT CHARLES ST	County PIKE	DMH Licensed	No
BOWLING GREEN MO 63334-2221	Region 5	Facility Number	05511
			00011
PARKSIDE-ASSISTED LIVING BY AMERICARE			
2100 PARKSIDE AVE	<b>Telephone</b> (573) 308-0834	Alzheimer's Unit	NO
ROLLA MO 65401-5472	Level of Care: ALF**	Bed Capacity	28
Mailing Address 2100 PARKSIDE AVE	County PHELPS	DMH Licensed	No
ROLLA MO 65401-5472	Region 6	Facility Number	31191
	Ü		
PARKVIEW HEALTH CARE FACILITY			
119 WEST FOREST	<b>Telephone</b> (417) 326-3000	Alzheimer's Unit	Yes
BOLIVAR MO 65613-1316	Level of Care: SNF	<b>Bed Capacity</b>	78
Mailing Address 119 WEST FOREST	County POLK	DMH Licensed	No
BOLIVAR MO 65613-1316	Region 1 Medicare/Medicaid	Facility Number	17638
PARKVIEW HEALTHCARE			
128 NORTH HARDESTY	<b>Telephone</b> (816) 241-2020	Alzheimer's Unit	No
KANSAS CITY MO 64123-1404	Level of Care: SNF	Bed Capacity	120
Mailing Address 128 NORTH HARDESTY	County JACKSON	DMH Licensed	No
KANSAS CITY MO 64123-1404	Region 3 Medicare/Medicaid	Facility Number	02928
DADIZWAY HEAT WHI CADE CENTEED			
PARKWAY HEALTH CARE CENTER 2323 SWOPE PARKWAY	Tolophere (016) 024 1122	Alzheimer's Unit	Ma
	Telephone (816) 924-1122 Level of Care: SNF		No 97
	County JACKSON	Bed Capacity DMH Licensed	
Mailing Address 2323 SWOPE PARKWAY KANSAS CITY MO 64130-2638			No
KANSAS CITY MO 64130-2638	Region 3 Medicare/Medicaid	Facility Number	07092
PARKWAY SENIOR LIVING, THE			
550 NE NAPOLEON DR	<b>Telephone</b> (816) 228-8866	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64014-5403	Level of Care: ALF**	Bed Capacity	72
Mailing Address 550 NE NAPOLEON DR	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64014-5403	Region 3	Facility Number	29917
		•	
PARKWOOD MANOR			
325 NORTH SPRIGG ST	<b>Telephone</b> (573) 334-7011	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701-5531	Level of Care: RCF	<b>Bed Capacity</b>	10
Mailing Address 325 NORTH SPRIGG ST	<b>County</b> CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63701-5531	Region 2	<b>Facility Number</b>	06291

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PARKWOOD MANOR  325 NORTH SPRIGG ST  CAPE GIRARDEAU  MO 63701-5531  Level of Care: RCF*  Bed Capacity  Mailing Address 325 N SPRIGG ST  CAPE GIRARDEAU  MO 63701-5531  Region 2  PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE  805 PARKWOOD DR  SAINTE GENEVIEVE  MO 63670-1858  Telephone  (573) 334-7011  Alzheimer's Unit  Sed Capacity  DMH Licensed  Facility Number  Telephone  (573) 883-3883  Alzheimer's Unit  Bed Capacity	No 20 Yes 06291
CAPE GIRARDEAU MO 63701-5531  Level of Care: RCF*  Bed Capacity  County CAPE GIRARDEAU  MO 63701-5531  Region 2  Facility Number  PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE  805 PARKWOOD DR  Telephone (573) 883-3883  Alzheimer's Unit	20 Yes
Mailing Address 325 N SPRIGG ST CAPE GIRARDEAU MO 63701-5531 Region 2  PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE 805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	Yes
CAPE GIRARDEAU MO 63701-5531 Region 2 Facility Number  PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE 805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	
PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE 805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	06291
805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	
805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	
	Yes
Dear of our of o	66
Mailing Address 805 PARKWOOD DR County SAINTE GENEVIEVE DMH Licensed	No
SAINTE GENEVIEVE MO 63670-1858 Region 2 Facility Number	23234
PARKWOOD SKILLED NURSING AND REHABILITATION CENTER	
3201 PARKWOOD LN  Telephone (314) 291-5911  Alzheimer's Unit	No
MARYLAND HEIGHTS MO 63043-1334 Level of Care: SNF Bed Capacity	130
Mailing Address 3201 PARKWOOD LN  County SAINT LOUIS COUNTY DMH Licensed	No
MARYLAND HEIGHTS MO 63043-1334 Region 7 Medicare/Medicaid Facility Number	02471
PAUL L & MARTHA BARONE CARE CENTER TEMPORARY CLOSURE - STAFFING	
2101 NORTH ASH ST  Telephone (417) 448-3999  Alzheimer's Unit	Yes
NEVADA MO 64772-1082 Level of Care: SNF Bed Capacity	40
Mailing Address 2101 N ASH ST  County VERNON  DMH Licensed	No
NEVADA MO 64772-1082 Region 1 Medicaid Facility Number	16917
PEACE HAVEN ASSOCIATION	
12630 ROTT RD Telephone (314) 965-3833 Alzheimer's Unit	No
SAINT LOUIS MO 63127-1214 Level of Care: ICF Bed Capacity	42
Mailing Address 12630 ROTT RD County SAINT LOUIS COUNTY DMH Licensed	No
SAINT LOUIS MO 63127-1214 Region 7 Facility Number	06369
PEARL'S II EDEN FOR ELDERS	
PEARL'S II EDEN FOR ELDERS 611 NORTH COLLEGE Telephone (660) 748-4407 Alzheimer's Unit	No
	No 60
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Telephone (660) 748-4407  Alzheimer's Unit Level of Care: SNF  Bed Capacity	
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Telephone (660) 748-4407  Level of Care: SNF  Bed Capacity	60
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4 Medicare/Medicaid  Facility Number	60 No
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  County  MERCER  DMH Licensed  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number	60 No 06453
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  County  MERCER  DMH Licensed  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  Telephone  (660) 748-4407  Alzheimer's Unit	60 No 06453 No
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  SEDALIA  MO 65301-9327  Telephone  (660) 748-4407  Alzheimer's Unit  Medicare/Medicaid  Facility Number  Telephone  (660) 827-3222  Alzheimer's Unit  Bed Capacity	60 No 06453 No 139
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  SEDALIA  MO 65301-9327  Mailing Address 3017 BROOKING PARK AVE  County  PETTIS  COUNTY ASSISTED  LIVING  Level of Care: ALF**  Bed Capacity  Modeling Address 3017 BROOKING PARK AVE  County  PETTIS  DMH Licensed	60 No 06453 No 139 Yes
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  SEDALIA  MO 65301-9327  Telephone  (660) 748-4407  Alzheimer's Unit  Medicare/Medicaid  Facility Number  Telephone  (660) 827-3222  Alzheimer's Unit  Bed Capacity	60 No 06453 No 139
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4  Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  SEDALIA  MO 65301-9327  Mailing Address 3017 BROOKING PARK AVE  County  PETTIS  COUNTY ASSISTED  LIVING  Level of Care: ALF**  Bed Capacity  Modeling Address 3017 BROOKING PARK AVE  County  PETTIS  DMH Licensed	60 No 06453 No 139 Yes
611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Level of Care: SNF  Bed Capacity  Mailing Address 611 NORTH COLLEGE  PRINCETON  MO 64673-1051  Region 4 Medicare/Medicaid  Facility Number  PETTIS COUNTY ASSISTED LIVING, LLC  3017 BROOKING PARK AVENUE  SEDALIA  MO 65301-9327  Mo 65301-9327  Mo 65301-9327  Region 6  Telephone  (660) 748-4407  Alzheimer's Unit  Bed Capacity  Number  Region 4 Medicare/Medicaid  Facility Number  PETTIS  DMH Licensed  SEDALIA  MO 65301-9327  Region 6  Facility Number	60 No 06453 No 139 Yes
Telephone   G60) 748-4407   Alzheimer's Unit	60 No 06453 No 139 Yes 30112
Telephone   G60) 748-4407   Alzheimer's Unit	60 No 06453 No 139 Yes 30112

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PIN OAKS LIVING CENTER		
1525 WEST MONROE ST	<b>Telephone</b> (573) 581-7261	Alzheimer's Unit No
MEXICO MO 65265-1201	Level of Care: SNF	Bed Capacity 124
Mailing Address 1525 WEST MONROE ST	County AUDRAIN	DMH Licensed No
MEXICO MO 65265-1201	Region 5 Medicare/Medicaid	Facility Number 05804
PINE LODGE RESIDENTIAL CARE		
967 N MAPLE ST	<b>Telephone</b> (417) 345-0310	Alzheimer's Unit No
BUFFALO MO 65622-7568	Level of Care: RCF	Bed Capacity 20
		DMH Licensed No
Mailing Address 967 N MAPLE ST BUFFALO MO 65622-7568		
BUITALO MO 03022-1306	Region 1	Facility Number 25563
PINE VALLEY AT THE WOODLANDS		
620 WOODLAND MEADOWS	<b>Telephone</b> (636) 202-1050	Alzheimer's Unit No
ARNOLD MO 63010-2030	Level of Care: ALF**	Bed Capacity 48
Mailing Address 620 WOODLAND MEADOWS	County JEFFERSON	DMH Licensed No
ARNOLD MO 63010-2030	Region 2	Facility Number 31974
	8	•
PINE VALLEY RCF		
3381 1st STREET	<b>Telephone</b> (573) 760-8601	Alzheimer's Unit No
DOE RUN MO 63637-3155	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 3381 1st STREET	County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
DOE RUN MO 63637-3155	Region 2	Facility Number 08379
PINE VIEW MANOR, INC		
307 NORTH PINEVIEW ST	<b>Telephone</b> (660) 783-2118	Alzheimer's Unit No
STANBERRY MO 64489-1509	Level of Care: SNF	Bed Capacity 70
Mailing Address 307 NORTH PINEVIEW ST	County GENTRY	DMH Licensed No
STANBERRY MO 64489-1509	Region 4 Medicare/Medicaid	Facility Number 05832
STRIBERGY MO 04407 1307	Region 4 Medical e/Medicald	Tacinty (value)
PINE VIEW MANOR, INC		
307 NORTH PINEVIEW ST	<b>Telephone</b> (660) 783-2118	Alzheimer's Unit No
STANBERRY MO 64489-1509	Level of Care: ALF**	<b>Bed Capacity</b> 12
Mailing Address 307 NORTH PINEVIEW ST	County GENTRY	DMH Licensed No
STANBERRY MO 64489-1509	Region 4	Facility Number 05832
DIONEED SKILLED NIIDSING CENTED		
PIONEER SKILLED NURSING CENTER 1500 SOUTH KANSAS AVE	<b>Telephone</b> (660) 376-2001	Alzheimer's Unit No
MARCELINE MO 64658-1716  Malling Address 1500 S KANSAS AVE	Level of Care: SNF	Bed Capacity 96
Mailing Address 1500 S KANSAS AVE	County CHARITON	DMH Licensed No
MARCELINE MO 64658-1716	Region 5 Medicare/Medicaid	Facility Number 05900
PLEASANT HILL HEALTH AND REHABILITATION CENTER		
1300 BROADWAY	<b>Telephone</b> (816) 540-2116	Alzheimer's Unit Yes
PLEASANT HILL MO 64080-1842	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1300 BROADWAY	County CASS	DMH Licensed No
PLEASANT HILL MO 64080-1842	Region 3 Medicare/Medicaid	Facility Number 15101

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PLEASANT VALLEY MANOR			
213 DAVIS DR	MO (5555 005)	<b>Telephone</b> (417) 257-0179	Alzheimer's Unit No
WEST PLAINS	MO 65775-2274	Level of Care: RCF*	Bed Capacity 72
Mailing Address 213 DAVIS DR	MO (5775 2274	County HOWELL	DMH Licensed No
WEST PLAINS	MO 65775-2274	Region 1	Facility Number 13641
N. F. G. N. W. L. L. R. L.	AL CELVERY		
PLEASANT VALLEY MANOR CAR	RE CENTER	(017) 701 5077	
6814 SOBBIE RD	MO (4009 0555	<b>Telephone</b> (816) 781-5277	Alzheimer's Unit No
LIBERTY Mailing Address 6814 CORDIE DD	MO 64068-9555	Level of Care: SNF	Bed Capacity 102  DMH Licensed No
Mailing Address 6814 SOBBIE RD LIBERTY	MO 64068-9555	County CLAY  Region 4 Medicare/Medicaid	
LIDER I I	WO 04006-9333	Region 4 Medicare/Medicaid	Facility Number 06020
PLEASANT VIEW			
641 EUCLID AVE		<b>Telephone</b> (573) 406-1090	Alzheimer's Unit No
HANNIBAL	MO 63401-2959	Level of Care: ALF**	Bed Capacity 41
Mailing Address 641 EUCLID AVE	1410 03401 2737	County MARION	DMH Licensed No
HANNIBAL	MO 63401-2959	Region 5	Facility Number 25358
	110 00 101 2707	Region 5	25550
PLEASANT VIEW NURSING HOM	E		
470 RAINBOW DR		<b>Telephone</b> (660) 744-6252	Alzheimer's Unit No
ROCK PORT	MO 64482-1641	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 273		County ATCHISON	DMH Licensed No
ROCK PORT	MO 64482-0273	Region 4 Medicare/Medicaid	Facility Number 06041
			·
POINT LOOKOUT NURSING & RE	СНАВ		
11103 HISTORIC HIGHWAY 165		<b>Telephone</b> (417) 334-4105	Alzheimer's Unit Yes
HOLLISTER	MO 65672-6239	Level of Care: SNF	Bed Capacity 130
Mailing Address 11103 HISTORIC HI	IGHWAY 165	County TANEY	DMH Licensed No
HOLLISTER	MO 65672-6239	Region 1 Medicare/Medicaid	Facility Number 12716
POLARIS HEALTH & WELLNESS	OF ABBEY WOODS		
5026 FARAON ST		<b>Telephone</b> (816) 279-1591	Alzheimer's Unit No
SAINT JOSEPH	MO 64506-3375	Level of Care: SNF	Bed Capacity 100
Mailing Address 5026 FARAON ST	1.0	County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-3375	Region 4 Medicare/Medicaid	Facility Number 01463
POLARIS HEALTH & WELLNESS	OF ASHTON COURT		
1200 WEST COLLEGE ST	OI IMITON COURT	<b>Telephone</b> (816) 781-3020	Alzheimer's Unit Yes
LIBERTY	MO 64068-1036	Level of Care: SNF	Bed Capacity 140
Mailing Address 1200 WEST COLLEG		County CLAY	DMH Licensed No
LIBERTY	MO 64068-1036	Region 4 Medicare/Medicaid	Facility Number 01961
EIDEN I	01000 1030	region - Medical Cancolical	Tuelling Fulliper 01901
POLARIS HEALTH & WELLNESS	OF AUTUMN TERRACE		
6124 RAYTOWN RD		<b>Telephone</b> (816) 358-8222	Alzheimer's Unit Yes
RAYTOWN	MO 64133-4007	Level of Care: SNF	<b>Bed Capacity</b> 154
Mailing Address 6124 RAYTOWN RI	D	County JACKSON	DMH Licensed No
RAYTOWN	MO 64133-4007	Region 3 Medicare/Medicaid	Facility Number 00768
1011101111			

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POLARIS HEALTH & WELLNESS	OF LEE'S SUMMIT POINTE			
1501 SW 3RD ST		<b>Telephone</b> (816) 525-6300	Alzheimer's Unit No	)
LEE'S SUMMIT	MO 64081-2424	Level of Care: SNF	Bed Capacity 60	)
Mailing Address 1501 SW 3RD ST		County JACKSON	DMH Licensed No.	)
LEE'S SUMMIT	MO 64081-2424	Region 3 Medicare/Medicaid	Facility Number 12484	1
		_		
POLARIS HEALTH & WELLNESS	OF I IREDTV			
2201 GLENN HENDREN DR	OF LIBERT I	<b>Telephone</b> (816) 736-8800	Alzheimer's Unit No	
LIBERTY	MO 64068-3375	Level of Care: SNF	Bed Capacity 143	
Mailing Address 2201 GLENN HENDI		County CLAY	DMH Licensed No	
LIBERTY	MO 64068-3375			
LIBERTT	WO 04008-3373	Region 4 Medicare/Medicaid	Facility Number 16715	,
PORT GOOD GLAVARYELN GERVIG	TEG A L G			
POPA GOOD SAMARITAN SERVIC	ES, LLC	Tolonhone (417) 252 4440	Alabaimant-Ti-tt	
16979 HWY 39	MO 65760 6210	<b>Telephone</b> (417) 353-4448	Alzheimer's Unit Yes	
VERONA	MO 65769-6319	Level of Care: ALF**	Bed Capacity 8	
Mailing Address 16979 HWY 39	NO (577/0 (210	County LAWRENCE	DMH Licensed No	
VERONA	MO 65769-6319	Region 1	Facility Number 30440	)
PODTA CENTLA E MELLEM CADE	CONTER			
PORTAGEVILLE HEALTH CARE (	CENTER	T. 1 (572) 270 2017		
290 WEST STATE HWY 162	NO. (2072.0207	<b>Telephone</b> (573) 379-2017	Alzheimer's Unit No	
PORTAGEVILLE	MO 63873-9397	Level of Care: SNF	Bed Capacity 60	
Mailing Address PO BOX 408	1.0 (20.72 0.100	County NEW MADRID	DMH Licensed No	
PORTAGEVILLE	MO 63873-0408	Region 2 Medicare/Medicaid	Facility Number 17119	)
DODELAIC DECIDENTIAL CADE				
PORTIA'S RESIDENTIAL CARE		TD 1 1 (572) 696 2446	A11.	
307 NORTH BROADWAY	MO (2001 5102	<b>Telephone</b> (573) 686-3446	Alzheimer's Unit No	
POPLAR BLUFF	MO 63901-5103	Level of Care: RCF	Bed Capacity 20	
Mailing Address 307 N BROADWAY		County BUTLER	DMH Licensed Yes	
POPLAR BLUFF	MO 63901-5103	Region 2	Facility Number 03002	1
POTOSI MANOR, INC				
307 SOUTH HIGHWAY 21		<b>Telephone</b> (573) 438-3225	Alzheimer's Unit No	
POTOSI	MO 63664-9317	Level of Care: SNF	Bed Capacity 90	
Mailing Address 307 SOUTH HIGHW.		County WASHINGTON	DMH Licensed No	
POTOSI	MO 63664-9317	•	Facility Number 21648	
101031	WIO 03004-9317	Region 2 Medicare/Medicaid	Facility Number 21046	,
PREFERRED FAMILY HEALTHCA	RE. INC			
900 EAST LAHARPE	,	<b>Telephone</b> (660) 665-1962	Alzheimer's Unit No	)
KIRKSVILLE	MO 63501-4520	Level of Care: RCF*	Bed Capacity 57	
Mailing Address PO BOX 767	WO 03301-4320		DMH Licensed Yes	
e e	MO 62501 0767	County ADAIR		
KIRKSVILLE	MO 63501-0767	Region 5	Facility Number 21851	
PRIMROSE OF SEDALIA				
3761 WEST 10TH ST		<b>Telephone</b> (660) 527-7054	Alzheimer's Unit No	)
SEDALIA	MO 65301-2524	Level of Care: ALF**	Bed Capacity 90	
Mailing Address 3761 WEST 10TH ST		County PETTIS	DMH Licensed No	
SEDALIA	MO 65301-2524	Region 6	Facility Number 25967	
SEDITER I	1110 00001 202T	Acgion 0	2390/	

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PRIMROSE RETIREMENT COMM	UNITY OF JEFFERSON CITY		
1214 FREEDOM BLVD		<b>Telephone</b> (573) 634-5408	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-0082	Level of Care: ALF**	<b>Bed Capacity</b> 49
Mailing Address 1214 FREEDOM BL		County COLE	<b>DMH Licensed</b> No
JEFFERSON CITY	MO 65109-0082	Region 6	Facility Number 29697
PRIMROSE RETIREMENT COMM	IINITY OF KANSAS CITY		
8559 NORTH LINE CREEK PARKWA		<b>Telephone</b> (816) 468-8282	Alzheimer's Unit No
KANSAS CITY	MO 64154-2100	Level of Care: ALF**	Bed Capacity 44
Mailing Address 8559 NORTH LINE 0		County PLATTE	DMH Licensed No
KANSAS CITY	MO 64154-2100	Region 4	Facility Number 29020
PRINCETON SENIOR LIVING THE			
1701 S E OLDHAM PARKWAY	<u>.</u>	<b>Telephone</b> (816) 875-4950	Alzheimer's Unit YES
LEE'S SUMMIT	MO 64081-	Level of Care: ALF**	Bed Capacity 68
Mailing Address 1701 S E OLDHAM		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-	Region 3	Facility Number 32762
LEE 3 30 MINIT	WO 04001-	Region 3	racincy Number 32702
PROMISE CARE CENTER, LLC			
1111 CARE AVE		<b>Telephone</b> (417) 494-5037	Alzheimer's Unit No
NIXA	MO 65714-9679	Level of Care: RCF	Bed Capacity 126
Mailing Address 1111 CARE AVE		County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9679	Region 1	Facility Number 15935
PUTNAM COUNTY CARE CENTER	,		
1814 OAK ST		<b>Telephone</b> (660) 947-2492	Alzheimer's Unit NO
UNIONVILLE	MO 63565-1275	Level of Care: SNF	Bed Capacity 60
Mailing Address 1814 OAK ST	110 03303 1273	County PUTNAM	DMH Licensed No
UNIONVILLE	MO 63565-1275	Region 5 Medicare/Medicaid	Facility Number 06516
PUXICO NURSING & REHABILIAT	TION CENTER	T-l (572) 222 2125	Al-L-i
540 NORTH HIGHWAY 51	MO 62060 0117	Telephone (573) 222-3125 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 60
PUXICO  Molling Address 540 NORTH HWW 5	MO 63960-9117		
Mailing Address 540 NORTH HWY 5 PUXICO	MO 63960-9117	•	DMH Licensed No Facility Number 03163
FUAICO	WIO 03900-9117	Region 2 Medicare/Medicaid	Facility Number 03103
QUAIL RUN HEALTH CARE CENT	TER		
1405 WEST GRAND AVE		<b>Telephone</b> (816) 632-2151	Alzheimer's Unit No
CAMERON	MO 64429-1118	Level of Care: SNF	Bed Capacity 84
Mailing Address PO BOX 525		County DEKALB	DMH Licensed No
CAMERON	MO 64429-0525	Region 4 Medicare/Medicaid	Facility Number 03829
QUALITY RESIDENTIAL CARE			
2034 WEST COLLEGE		<b>Telephone</b> (417) 831-6466	Alzheimer's Unit No
SPRINGFIELD	MO 65806-1524	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8127		County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65801-8127	Region 1	Facility Number 13150
		<b>3</b> ·	•

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QUARTERS AT DES PERES, THE			
13230 MANCHESTER RD	<b>Telephone</b> (314) 821-2886	Alzheimer's Unit	No
DES PERES MO 63131-1706	Level of Care: SNF	Bed Capacity	147
Mailing Address 13230 MANCHESTER RD	County SAINT LOUIS COUNTY	DMH Licensed	No
DES PERES MO 63131-1706	Region 7 Medicare/Medicaid	Facility Number	26726
DANGH DECEDENTAL CADE EACH VIV. THE			
RANCH RESIDENTIAL CARE FACILITY THE	(572) 229 4252	A1 1	NI-
ROUTE 2, BOX 2790	<b>Telephone</b> (573) 238-4253	Alzheimer's Unit	No
MARBLE HILL MO 63764-9510	Level of Care: RCF*	Bed Capacity	32
Mailing Address ROUTE 2, BOX 2790	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL MO 63764-9510	Region 2	Facility Number	08707
RANCHO REHAB AND HEALTHCARE CENTER			
615 RANCHO LN	<b>Telephone</b> (314) 839-2150	Alzheimer's Unit	No
FLORISSANT MO 63031-1717	Level of Care: SNF	Bed Capacity	120
Mailing Address 615 RANCHO LN	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 63031-1717	Region 7 Medicare/Medicaid	Facility Number	02585
		·	
RATLIFF CARE CENTER			
717 NORTH SPRIGG	<b>Telephone</b> (573) 335-5810	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701-4815	Level of Care: SNF	Bed Capacity	46
Mailing Address 717 NORTH SPRIGG	<b>County</b> CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU MO 63701-4815	Region 2 Medicare/Medicaid	Facility Number	17420
DAVENIMOOD ACCICTED I MING DV AMEDICADE			
RAVENWOOD - ASSISTED LIVING BY AMERICARE	Tolonhono (417) 800 6000	Alzhaimar's Unit	Vac
1950 EAST REPUBLIC RD	Telephone (417) 890-6000	Alzheimer's Unit	Yes
1950 EAST REPUBLIC RD SPRINGFIELD MO 65804-6763	Level of Care: ALF**	Bed Capacity	66
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD	Level of Care: ALF** County GREENE	Bed Capacity DMH Licensed	66 No
1950 EAST REPUBLIC RD SPRINGFIELD MO 65804-6763	Level of Care: ALF**	Bed Capacity	66
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD	Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed	66 No
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763	Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed	66 No
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA	Level of Care: ALF** County GREENE Region 1	Bed Capacity DMH Licensed Facility Number	66 No 20791
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD	Level of Care: ALF** County GREENE Region 1  CARE Telephone (660) 263-8004	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	66 No 20791 Yes
1950 EAST REPUBLIC RD  SPRINGFIELD  MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD  MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY  MO 65270-3002	Level of Care: ALF** County GREENE Region 1  CARE Telephone (660) 263-8004 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	66 No 20791 Yes 55
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	66 No 20791 Yes 55 No
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	66 No 20791 Yes 55 No
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	66 No 20791 Yes 55 No
1950 EAST REPUBLIC RD  SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	66 No 20791 Yes 55 No 16411
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	66 No 20791 Yes 55 No 16411
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	66 No 20791 Yes 55 No 16411 Yes 130
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084  Mailing Address 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	66 No 20791 Yes 55 No 16411 Yes 130 No
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084  Mailing Address 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084  REPUBLIC NURSING & REHAB	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 20791 Yes 55 No 16411 Yes 130 No 22063
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR INDEPENDENCE MO 64057-1084  Mailing Address 1800 S SWOPE DR INDEPENDENCE MO 64057-1084  REPUBLIC NURSING & REHAB 901 EAST HIGHWAY 174	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 732-1822	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 20791 Yes 55 No 16411 Yes 130 No 22063
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084  Mailing Address 1800 S SWOPE DR  INDEPENDENCE MO 64057-1084  REPUBLIC NURSING & REHAB  901 EAST HIGHWAY 174  REPUBLIC MO 65738-1155	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 732-1822 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 20791 Yes 55 No 16411 Yes 130 No 22063
SPRINGFIELD MO 65804-6763  Mailing Address 1950 E REPUBLIC RD  SPRINGFIELD MO 65804-6763  RAVENWOOD TERRACE - ASSISTED LIVING BY AMERICA 1830 RAVENWOOD  MOBERLY MO 65270-3002  Mailing Address 1830 RAVENWOOD  MOBERLY MO 65270-3002  REHABILITATION CENTER OF INDEPENDENCE, THE 1800 S SWOPE DR INDEPENDENCE MO 64057-1084  Mailing Address 1800 S SWOPE DR INDEPENDENCE MO 64057-1084  REPUBLIC NURSING & REHAB 901 EAST HIGHWAY 174	Level of Care: ALF** County GREENE Region 1  CARE  Telephone (660) 263-8004 Level of Care: ALF** County RANDOLPH Region 5  Telephone (816) 257-2566 Level of Care: SNF County JACKSON Region 3 Medicare/Medicaid  Telephone (417) 732-1822	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	66 No 20791 Yes 55 No 16411 Yes 130 No 22063

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DEGE WANTEN CONVANTEGED TO			
REST HAVEN CONVALESCENT & 1800 SOUTH INGRAM	RETIREMENT HOME	<b>Telephone</b> (660) 827-0845	Alzheimer's Unit No
SEDALIA	MO 65301-7538	Level of Care: SNF	Bed Capacity 86
Mailing Address 1800 S INGRAM	WIO 03301-7336	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-7538	Region 6 Medicare/Medicaid	Facility Number 06582
SEDALIA	WO 03301-7338	Region o Medicare/Medicaid	racinty Number 00382
RICHLAND CARE CENTER, INC			
400 TRI-COUNTY LANE		<b>Telephone</b> (573) 765-3243	Alzheimer's Unit No
RICHLAND	MO 65556-8582	Level of Care: SNF	Bed Capacity 86
Mailing Address PO BOX 756		County PULASKI	DMH Licensed No
RICHLAND	MO 65556-0756	Region 6 Medicare/Medicaid	Facility Number 08100
RICHMOND TERRACE ASSISTED	LIVING	(214) (46,0000	A11
1633 LACLEDE STATION RD	MO 62117 2020	<b>Telephone</b> (314) 646-8000	Alzheimer's Unit No
SAINT LOUIS	MO 63117-2038	Level of Care: ALF**	Bed Capacity 99
Mailing Address 1633 LACLEDE STA		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63117-2038	Region 7	Facility Number 22269
RIDGE CREST NURSING CENTER			
706 SOUTH MITCHELL		<b>Telephone</b> (660) 429-2177	Alzheimer's Unit Yes
WARRENSBURG	MO 64093-2828	Level of Care: SNF	Bed Capacity 120
Mailing Address 706 SOUTH MITCHE	ELL	County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-2828	Region 3 Medicare/Medicaid	Facility Number 06640
			•
RIDGEVIEW ASSISTED LIVING CI	ENTER		
13134 STATE HIGHWAY 25		<b>Telephone</b> (573) 624-4433	Alzheimer's Unit No
DEXTER	MO 63841-9740	Level of Care: ALF**	<b>Bed Capacity</b> 26
Mailing Address 13134 STATE HIGHY	WAY 25	County STODDARD	<b>DMH Licensed</b> No
DEXTER	MO 63841-9740	Region 2	Facility Number 10128
RIDGEVIEW LIVING COMMUNITY	Y		
500 BARRETT DRIVE		<b>Telephone</b> (573) 276-3843	Alzheimer's Unit No
MALDEN	MO 63863-1204	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 500 BARRETT DRIV	/E	County DUNKLIN	DMH Licensed No
MALDEN	MO 63863-1204	Region 2 Medicare/Medicaid	Facility Number 06656
DIDCEWAY DECIDENTIAL CARE			
RIDGEWAY RESIDENTIAL CARE 431 RUSSELL		<b>Telephone</b> (573) 468-4318	Alzheimer's Unit No
	MO 62090 2229	• '	
SULLIVAN Moiling Address DO DOV 267	MO 63080-2228	Level of Care: ALF	Bed Capacity 20 DMH Licensed Yes
Mailing Address PO BOX 267 SULLIVAN	MO 63080-0267	County FRANKLIN	
SULLIVAIN	1410 03000-0207	Region 6	Facility Number 06668
RIVER CITY LIVING COMMUNITY	Y		
3038 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3404	Alzheimer's Unit Yes
JEFFERSON CITY	MO 65109-0525	Level of Care: SNF	Bed Capacity 87
Mailing Address 3038 WEST TRUMA	N BLVD	County COLE	<b>DMH Licensed</b> No
JEFFERSON CITY	MO 65109-0525	Region 6 Medicare/Medicaid	Facility Number 04826

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RIVER CROSSING OF CREVE COE	CUR			
11278 SCHUETZ RD	MO	<b>Telephone</b> (314) 991-4066		No.
SAINT LOUIS	MO 63146-4957	Level of Care: SNF		20
Mailing Address 11278 SCHUETZ RD		County SAINT LOUIS COUNTY		No.
SAINT LOUIS	MO 63146-4957	Region 7 Medicare/Medicaid	Facility Number 1637	78
RIVER MIST - ASSISTED LIVING B	BY AMERICARE			
2050 WEST MAUD		<b>Telephone</b> (573) 686-2833	Alzheimer's Unit	lo.
POPLAR BLUFF	MO 63901-4000	Level of Care: ALF**		42
Mailing Address 2050 WEST MAUD	110 00,01 1000	County BUTLER		No.
POPLAR BLUFF	MO 63901-4000	Region 2	Facility Number 2029	
RIVER OAKS CARE CENTER				
1001 NORTH WALNUT		<b>Telephone</b> (573) 695-2121	Alzheimer's Unit	Vо
STEELE	MO 63877-1355	Level of Care: SNF		90
Mailing Address 1001 N WALNUT	113 00077 1000	County PEMISCOT		No
STEELE	MO 63877-1355	Region 2 Medicare/Medicaid	Facility Number 0667	
	110 0007, 1000	region 2 intedical control in the second	1 demog 1 damoe1 0007	_
RIVERBEND HEIGHTS HEALTH &	REHABILITATION			
1221 HIGHWAY 13 SOUTH		<b>Telephone</b> (660) 259-4695	Alzheimer's Unit Yo	es
LEXINGTON	MO 64067-7187	Level of Care: SNF	Bed Capacity 15	54
Mailing Address 1221 HIGHWAY 13 S	SOUTH	<b>County</b> LAFAYETTE	DMH Licensed N	Vо
LEXINGTON	MO 64067-7187	Region 3 Medicare/Medicaid	Facility Number 0433	33
DIVERDELL CARE CENTEED				
RIVERDELL CARE CENTER		Telephone (660) 992 7600	Alahaiman'a Unit	To.
1121 11TH ST BOONVILLE	MO 65222 1410	Telephone (660) 882-7600 Level of Care: SNF		10 60
	MO 65233-1419			50 Jo
Mailing Address 1121 11TH ST BOONVILLE	MO 65233-1419	•		No No
BOONVILLE	MO 03233-1419	Region 6 Medicare/Medicaid	Facility Number 1442	28
RIVERSIDE NURSING & REHABIL	ITATION CENTER, LLC			
4700 NW CLIFFVIEW DR		<b>Telephone</b> (816) 741-5105	Alzheimer's Unit	Ю
RIVERSIDE	MO 64150-1237	Level of Care: SNF	Bed Capacity 18	80
Mailing Address 4700 NW CLIFFVIEV	V DR	County PLATTE	DMH Licensed N	Vо
RIVERSIDE	MO 64150-1237	Region 4 Medicare/Medicaid	Facility Number 0153	32
RIVERSIDE PLACE				
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit	Vo.
SAINT JOSEPH	MO 64507-2527	Level of Care: ALF		00
Mailing Address 1616 WEISENBORN		County BUCHANAN		es
SAINT JOSEPH	MO 64507-2527	Region 4	Facility Number 1034	
DAMAI JOBELII	140 04307-2327	region 7	Tacinty Number 1032	Ю
RIVERSIDE PLACE				
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit Yo	es
SAINT JOSEPH	MO 64507-2527	Level of Care: SNF	Bed Capacity	90
Mailing Address 1616 WEISENBORN	RD	<b>County</b> BUCHANAN	DMH Licensed N	Vo
SAINT JOSEPH	MO 64508-2527	Region 4 Medicare/Medicaid	Facility Number 1034	<del>1</del> 6

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RIVERVIEW AT THE PARK CARE	AND REHABILITATION CENTER			
1100 PROGRESS PARKWAY		<b>Telephone</b> (573) 883-3454	Alzheimer's Unit	Yes
SAINTE GENEVIEVE	MO 63670-9232	Level of Care: SNF	Bed Capacity	120
Mailing Address 1100 PROGRESS PAR		County SAINTE GENEVIEVE	DMH Licensed	No
SAINTE GENEVIEVE	MO 63670-9232	Region 2 Medicare/Medicaid	Facility Number	06729
RIVERVIEW NURSING CENTER				
10303 STATE RD C		<b>Telephone</b> (573) 676-3136	Alzheimer's Unit	No
MOKANE	MO 65059-1211	Level of Care: SNF	Bed Capacity	60
Mailing Address 10303 STATE RD C		County CALLAWAY	DMH Licensed	No
MOKANE	MO 65059-1211	Region 6 Medicare/Medicaid	Facility Number	06730
DATED VIEW DEGIDENCE A DATE OF				
RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST		<b>Telephone</b> (417) 581-2510	Alzheimer's Unit	No
OZARK	MO 65721-9103	Level of Care: RCF*	Bed Capacity	40
Mailing Address PO BOX 157	MO 03721-9103	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-0157	Region 1	Facility Number	01426
OLIAN	WIO 03721-0137	Kegion 1	racinty Number	01420
RIVERWAYS MANOR				
403 WATERCRESS RD		<b>Telephone</b> (573) 323-4282	Alzheimer's Unit	No
VAN BUREN	MO 63965-9100	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 969		County CARTER	DMH Licensed	No
VAN BUREN	MO 63965-0969	Region 2 Medicare/Medicaid	Facility Number	06744
ROARING RIVER HEALTH AND RE	EHABILITATION			
812 OLD EXETER RD		<b>Telephone</b> (417) 847-2184	Alzheimer's Unit	Yes
CASSVILLE	MO 65625-1704	Level of Care: SNF	Bed Capacity	90
Mailing Address 812 OLD EXETER RI	)	County BARRY	DMH Licensed	No
CASSVILLE	MO 65625-1704	Region 1 Medicare/Medicaid	Facility Number	10644
ROCK HILL NURSING CENTER				
8033 HOLMES ROAD		<b>Telephone</b> (816) 363-6222	Alzheimer's Unit	No
KANSAS CITY	MO 64131-2115	Level of Care: SNF	Bed Capacity	100
Mailing Address 8033 HOLMES ROAD		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64131-2115	Region 3 Medicare/Medicaid	Facility Number	03680
		Region 5 Medicare/Medicare	Tuesting Transpor	03000
ROCK ISLAND VILLAGE				
619 EAST 8TH STREET		<b>Telephone</b> (573) 557-9545	Alzheimer's Unit	Yes
ELDON	MO 65026-4740	Level of Care: ALF**	<b>Bed Capacity</b>	70
Mailing Address 619 EAST 8TH STRE	ET	County MILLER	DMH Licensed	No
ELDON	MO 65026-4740	Region 6	Facility Number	30865
DOCK DOING MUDGING GENERA				
ROCK POINT NURSING CENTER		Tolonhono (572) 202 2212	Alghaimanta II14	<b>V</b>
8477 NORTH STREET BIRCH TREE	MO 65/38 8007	Telephone (573) 292-3212 Level of Care: SNF	Alzheimer's Unit	Yes 86
Mailing Address 8477 NORTH STREE	MO 65438-8887	County SHANNON	Bed Capacity  DMH Licensed	80 No
BIRCH TREE	MO 65438-8887	·	Facility Number	
DIXCII IXEE	1410 03430-000/	Region 2 Medicare/Medicaid	racinty Number	00560

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DOCKHINA MANOD ACCIONED IA	VIDIO.			
ROCKHILL MANOR ASSISTED LI	VING	T-1	A 1-1	NI.
4235 LOCUST ST	MO (4110 1016	<b>Telephone</b> (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY Mailing Address DO DOV 5020	MO 64110-1016	Level of Care: ALF County JACKSON	Bed Capacity DMH Licensed	154 Vac
Mailing Address PO BOX 5930	MO 64171-0930	·		Yes
KANSAS CITY	MO 641/1-0930	Region 3	Facility Number	06794
ROCKHILL MANOR ASSISTED LI	VING			
4235 LOCUST ST		<b>Telephone</b> (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1016	Level of Care: ALF**	Bed Capacity	36
Mailing Address PO BOX 5930		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64171-0930	Region 3	Facility Number	06794
ROCKY RIDGE MANOR		T. I. I. (417) 004 0116	A11	N
3111 HIGHWAY A	MO 65704 9105	<b>Telephone</b> (417) 924-8116	Alzheimer's Unit	No
MANSFIELD	MO 65704-8105	Level of Care: SNF County WRIGHT	Bed Capacity	65 N-
Mailing Address 3111 HWY A	MO (5704 9105		DMH Licensed	No
MANSFIELD	MO 65704-8105	Region 1 Medicare/Medicaid	Facility Number	04996
ROLLA HEALTH & REHABILITA	TION SUITES			
1200 MCCUTCHEN RD		<b>Telephone</b> (573) 364-2311	Alzheimer's Unit	No
ROLLA	MO 65401-2615	Level of Care: SNF	Bed Capacity	116
Mailing Address 1200 MCCUTCHEN	RD	County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2615	Region 6 Medicare/Medicaid	Facility Number	08862
ROLLA PRESBYTERIAN MANOR				
1200 HOMELIFE PLAZA		<b>Telephone</b> (573) 364-7336	Alzheimer's Unit	Yes
ROLLA	MO 65401-2512	Level of Care: ALF**	Bed Capacity	37
Mailing Address 1200 HOMELIFE PL		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2512	Region 6	Facility Number	18727
ROLLA PRESBYTERIAN MANOR				
1200 HOMELIFE PLAZA		<b>Telephone</b> (573) 364-7336	Alzheimer's Unit	No
ROLLA	MO 65401-2512	Level of Care: SNF	Bed Capacity	30
Mailing Address 1200 HOMELIFE PL	AZA	County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2512	Region 6 Medicare/Medicaid	Facility Number	18727
DOCEWOOD DEILAD AND HEAT OF	HCADE CENTED			
ROSEWOOD REHAB AND HEALT	HUAKE UENTEK	T-11 (916) 254 2500	Allahatan anto XI et	<b>V</b>
1415 WEST WHITE OAK	MO 64050 2500	<b>Telephone</b> (816) 254-3500	Alzheimer's Unit	Yes
INDEPENDENCE  Moiling Address 1415 WEST WHITE	MO 64050-2590	Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed	300 No
Mailing Address 1415 WEST WHITE		•		No
INDEPENDENCE	MO 64050-2590	Region 3 Medicare/Medicaid	Facility Number	06604
ROSEWOOD RESIDENTIAL CARE				
13450 COUNTY RD 7040		<b>Telephone</b> (573) 341-8000	Alzheimer's Unit	No
ROLLA	MO 65401-8122	Level of Care: RCF	<b>Bed Capacity</b>	9
Mailing Address 13450 COUNTY RD	7040	County PHELPS	DMH Licensed	No
ROLLA	MO 65401-8122	Region 6	Facility Number	21083

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ROYAL OAK NURSING & REHAB				
4960 LACLEDE AVE		<b>Telephone</b> (314) 361-6240	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-1404	Level of Care: SNF	Bed Capacity	168
Mailing Address 4960 LACLEDE AVI	3	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63108-1404	Region 7 Medicare/Medicaid	Facility Number	06322
ROYAL OAKS CARE CENTER LLO				
507 EAST MARSHALL		<b>Telephone</b> (660) 335-6500	Alzheimer's Unit	No
SWEET SPRINGS	MO 65351-9759	Level of Care: ALF	Bed Capacity	51
Mailing Address PO BOX 204		County SALINE	DMH Licensed	Yes
SWEET SPRINGS	MO 65351-0204	Region 5	Facility Number	14953
			•	
SALEM CARE CENTER				
1203 NORTH JACKSON	1.0	<b>Telephone</b> (417) 425-3062	Alzheimer's Unit	No
SALEM	MO 65560-1076	Level of Care: SNF	Bed Capacity	60
Mailing Address 1203 NORTH JACKS		County DENT	DMH Licensed	No
SALEM	MO 65560-1076	Region 6 Medicaid	Facility Number	02354
SALEM RESIDENTIAL CARE				
1207 EAST ROOSEVELT ST		<b>Telephone</b> (573) 729-9449	Alzheimer's Unit	No
SALEM	MO 65560-9676	Level of Care: RCF*	<b>Bed Capacity</b>	35
Mailing Address 1207 EAST ROOSEV	ELT ST	County DENT	DMH Licensed	No
SALEM	MO 65560-9676	Region 6	<b>Facility Number</b>	19746
SALT DIVED COMMUNITY CADE				
SALT RIVER COMMUNITY CARE		Tolophono (572) 599 4175	Alzhoimor's Unit	Vac
142 SHELBY PLAZA RD	MO 62468 1065	Telephone (573) 588-4175	Alzheimer's Unit	Yes
142 SHELBY PLAZA RD SHELBINA	MO 63468-1065	Level of Care: SNF	Bed Capacity	120
142 SHELBY PLAZA RD SHELBINA <b>Mailing Address</b> PO BOX 529		Level of Care: SNF County SHELBY	Bed Capacity DMH Licensed	120 No
142 SHELBY PLAZA RD SHELBINA	MO 63468-1065 MO 63468-0529	Level of Care: SNF	Bed Capacity	120
142 SHELBY PLAZA RD SHELBINA <b>Mailing Address</b> PO BOX 529		Level of Care: SNF County SHELBY	Bed Capacity DMH Licensed	120 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA SARCOXIE NURSING CENTER		Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER	MO 63468-0529	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 06934 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE		Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 06934
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER	MO 63468-0529	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE	MO 63468-0529	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 06934 No 40
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248	MO 63468-0529 MO 64862-9211	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No 40 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248	MO 63468-0529  MO 64862-9211  MO 64862-0248	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No 40 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE	MO 63468-0529  MO 64862-9211  MO 64862-0248	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No 40 No
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI	MO 63468-0529  MO 64862-9211  MO 64862-0248	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 06934  No 40 No 06864
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06934 No 40 No 06864
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No 40 No 06864
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 06934 No 40 No 06864 Yes 189
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR HERCULANEUM	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550  MO 63048-1550	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06934 No 40 No 06864 Yes 189
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR HERCULANEUM SCHUYLER COUNTY NURSING HO	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550  MO 63048-1550	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06934 No 40 No 06864 Yes 189 No 09605
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR HERCULANEUM SCHUYLER COUNTY NURSING HO 1306 US HIGHWAY 63	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550  MO 63048-1550  DME	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Telephone (660) 766-2291	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06934 No 40 No 06864 Yes 189 No 09605
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR HERCULANEUM  SCHUYLER COUNTY NURSING HO 1306 US HIGHWAY 63 QUEEN CITY	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550  MO 63048-1550  DME  MO 63561-2251	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Telephone (660) 766-2291 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06934 No 40 No 06864 Yes 189 No 09605
142 SHELBY PLAZA RD SHELBINA Mailing Address PO BOX 529 SHELBINA  SARCOXIE NURSING CENTER 1505 MINER SARCOXIE Mailing Address PO BOX 248 SARCOXIE  SCENIC NURSING AND REHABILI 1333 SCENIC DR HERCULANEUM Mailing Address 1333 SCENIC DR HERCULANEUM SCHUYLER COUNTY NURSING HO 1306 US HIGHWAY 63	MO 63468-0529  MO 64862-9211  MO 64862-0248  TATION CENTER, LLC  MO 63048-1550  MO 63048-1550  DME  MO 63561-2251	Level of Care: SNF County SHELBY Region 5 Medicare/Medicaid  Telephone (417) 548-3434 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 931-2995 Level of Care: SNF County JEFFERSON Region 2 Medicare/Medicaid  Telephone (660) 766-2291	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06934 No 40 No 06864 Yes 189 No 09605

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SEASONS REHAB AND HEALTHCA	RE CENTER			
15600 WOODS CHAPEL RD		<b>Telephone</b> (816) 478-4757	Alzheimer's Unit Yes	
KANSAS CITY	MO 64139-1261	Level of Care: SNF	Bed Capacity 78	
Mailing Address 15600 WOODS CHAP		County JACKSON	DMH Licensed No	
KANSAS CITY	MO 64139-1261	Region 3 Medicare/Medicaid	Facility Number 23712	
SECRET GARDENS				
351 KEITH ST		<b>Telephone</b> (573) 518-0444	Alzheimer's Unit No	
PARK HILLS	MO 63601-2049	Telephone (573) 518-0444 Level of Care: RCF		
	WO 03001-2049		Bed Capacity 10  DMH Licensed Yes	
Mailing Address PO BOX 481 PARK HILLS	MO 63601-0481	County SAINT FRANCOIS  Region 2		
FARR HILLS	WIO 03001-0481	Region 2	Facility Number 17813	
SENATH SOUTH HEALTH CARE CI	ENTER			
300 EAST HORNBECK ST		<b>Telephone</b> (573) 738-2627	Alzheimer's Unit No	
SENATH	MO 63876-9225	Level of Care: SNF	Bed Capacity 150	
Mailing Address PO BOX 940		County DUNKLIN	DMH Licensed No	,
SENATH	MO 63876-0940	Region 2 Medicare/Medicaid	Facility Number 16147	
		C		
SENECA HOME PLACE				
2400 SOUTH CHEROKEE AVE		<b>Telephone</b> (417) 776-8053	Alzheimer's Unit No	
SENECA	MO 64865-9323	Level of Care: RCF*	Bed Capacity 30	
Mailing Address 2400 SOUTH CHERO	KEE AVE	County NEWTON	DMH Licensed No	
SENECA	MO 64865-9323	Region 1	Facility Number 17571	
CENIECA HOLICE				
SENECA HOUSE 914 CHICKESAW ST		<b>Telephone</b> (417) 776-8041	Alzheimer's Unit No	
SENECA	MO 64865-9281	Level of Care: SNF	Bed Capacity 80	
Mailing Address 914 CHICKESAW ST	1410 04003-7201	County NEWTON	DMH Licensed No	
SENECA	MO 64865-9281	Region 1 Medicare/Medicaid	Facility Number 17090	
BENEEN	1410 04003 7201	Region 1 Wedical e/Medicald	racinty Number 17090	
SEVILLE CARE CENTER				
35625 HIGHWAY 72		<b>Telephone</b> (417) 425-3062	Alzheimer's Unit No	
SALEM	MO 65560-7217	Level of Care: SNF	Bed Capacity 90	
Mailing Address 35625 HIGHWAY 72		County DENT	DMH Licensed No	
SALEM	MO 65560-0746	Region 6 Medicare/Medicaid	Facility Number 07110	
SEYMOUR RESIDENTIAL CARE FA	.CII ITV INC			
730 HODIAMONT AVE	CILII I IIVC	<b>Telephone</b> (314) 725-3709	Alzheimer's Unit No	
SAINT LOUIS	MO 63112-2002	Level of Care: ALF	Bed Capacity 20	
Mailing Address 730 HODIAMONT AV		County SAINT LOUIS CITY	DMH Licensed Yes	
SAINT LOUIS	MO 63112-2002	Region 7		
BAINI LOUIS	1710 UJ112-2UU2	region /	Facility Number 16828	
SHADY OAKS HEALTHCARE CENT	TER			
335 BUSINESS ROUTE 63		<b>Telephone</b> (417) 264-7256	Alzheimer's Unit No	
THAYER	MO 65791-1415	Level of Care: SNF	Bed Capacity 120	
Mailing Address 335 BUSINESS ROUT	TE 63	County OREGON	DMH Licensed No	
Mailing Address 335 BUSINESS ROUT THAYER	TE 63 MO 65791-1415	County OREGON Region 2 Medicare/Medicaid	DMH Licensed No Facility Number 01364	

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SHANGRI-LA REHAB & LIVING CI	ENTER	T. I. I. (015) 220 5577	411	
930 NORTH EAST DUNCAN RD		<b>Telephone</b> (816) 229-6677	Alzheimer's Unit	No
BLUE SPRINGS	MO 64014-2173	Level of Care: SNF	Bed Capacity	120
Mailing Address 930 NORTH EAST D		County JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-2173	Region 3 Medicare/Medicaid	Facility Number	00677
SHELBINA VILLA LIFECARE				
218 EAST SHELBINA AVE		<b>Telephone</b> (573) 588-4115	Alzheimer's Unit	No
SHELBINA	MO 63468-4328	Level of Care: ALF**	Bed Capacity	68
Mailing Address 218 EAST SHELBINA		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-4328	Region 5	Facility Number	18584
SHEPHERD OF THE HILLS LIVING	C CENTED			
996 STATE HIGHWAY 248	CENTER	<b>Telephone</b> (417) 334-6431	Alzheimer's Unit	No
BRANSON	MO 65616-8154	Level of Care: SNF	Bed Capacity	100
Mailing Address 996 STATE HWY 248		County TANEY	DMH Licensed	No
BRANSON		•		
DRAINSOIN	MO 65616-8154	Region 1 Medicare/Medicaid	Facility Number	06810
SHEPHERD'S VIEW ASSISTED LIV	TING			
100 SHEPHERDS LN		<b>Telephone</b> (417) 778-7959	Alzheimer's Unit	No
ALTON	MO 65606-0429	Level of Care: ALF**	Bed Capacity	39
Mailing Address PO BOX 429		County OREGON	DMH Licensed	No
ALTON	MO 65606-0429	Region 2	Facility Number	23135
				20100
SHIRKEY NURSING & REHABILIT	ATION CENTER			
804 WOLLARD BLVD		<b>Telephone</b> (816) 776-5403	Alzheimer's Unit	Yes
RICHMOND	MO 64085-2227	Level of Care: SNF	Bed Capacity	197
Mailing Address 804 WOLLARD BLV	D	County RAY	DMH Licensed	No
RICHMOND	MO 64085-2227	Region 4 Medicare/Medicaid	Facility Number	07289
SIKESTON CONVALESCENT CENT	rer			
103 KENNEDY DR		<b>Telephone</b> (573) 471-6900	Alzheimer's Unit	Yes
SIKESTON	MO 63801-5126	Level of Care: SNF	Bed Capacity	120
Mailing Address 103 KENNEDY DR		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-5126	Region 2 Medicare/Medicaid	Facility Number	07331
Sitted Total	110 03001 3120	Region 2 Medicare/Medicard	Tuelley Tulliber	07331
SILEX COMMUNITY CARE				
111 DUNCAN MANSION RD		<b>Telephone</b> (573) 384-5218	Alzheimer's Unit	No
SILEX	MO 63377-2229	Level of Care: SNF	Bed Capacity	60
Mailing Address 111 DUNCAN MANS	SION RD	County LINCOLN	DMH Licensed	No
SILEX	MO 63377-2229	Region 5 Medicare/Medicaid	Facility Number	06838
SILEX RESIDENTIAL HOME, LLC				
145 DUNCAN MANSION RD		<b>Telephone</b> (573) 384-5213	Alzheimer's Unit	No
SILEX	MO 63377-2229	Level of Care: RCF*	Bed Capacity	60
Mailing Address 145 DUNCAN MANS		County LINCOLN	DMH Licensed	Yes
SILEX	MO 63377-2229	Region 5	Facility Number	20982
~	5 000 222/	region -	- nome i tumber	20702

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SILVER CREEK - ASSISTED LIVIN	G BY AMERICARE		
3325 TEXAS AVE	0 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>Telephone</b> (417) 626-8100	Alzheimer's Unit Yes
JOPLIN	MO 64804-4343	Level of Care: ALF**	Bed Capacity 68
Mailing Address 3325 TEXAS AVE	110 04004-4343	County NEWTON	DMH Licensed No
JOPLIN	MO 64804-4343	•	
JOPLIN	MO 04804-4343	Region 1	Facility Number 20541
SILVER SPUR			
3300 TEXAS AVE		<b>Telephone</b> (314) 773-3408	Alzheimer's Unit No
SAINT LOUIS	MO 63118-3111	Level of Care: ALF	Bed Capacity 37
Mailing Address 3300 TEXAS AVE		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63118-3111	Region 7	Facility Number 00185
SILVERADO LEE'S SUMMIT			
3101 SW 3RD STREET		<b>Telephone</b> (816) 321-1648	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-4060	Level of Care: ALF**	Bed Capacity 54
Mailing Address 3101 SW 3RD STREE	ET	County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-4060	Region 3	Facility Number 31077
	1.20 0.001 1.000	Region 5	1 ucing 1 units 2
SILVERSTONE PLACE			
2735 EAGLESON DR		<b>Telephone</b> (573) 426-6200	Alzheimer's Unit No
ROLLA	MO 65401-8384	Level of Care: SNF	Bed Capacity 110
Mailing Address 2735 EAGLESON DR	R	County PHELPS	<b>DMH Licensed</b> No
ROLLA	MO 65401-8384	Region 6 Medicare/Medicaid	Facility Number 29351
SISTERS MISSION			
3225 N FLORISSANT AVE		<b>Telephone</b> (314) 421-6022	Alzheimer's Unit No
SAINT LOUIS	MO 63107-3521	Level of Care: SNF	Bed Capacity 47
Mailing Address 3225 N FLORISSANT	ΓAVE	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63107-3521	Region 7 Medicare/Medicaid	Facility Number 04563
SKYLINE ASSISTED LIVING LLC			
100 HARD ROCK RD		<b>Telephone</b> (573) 323-2108	Alzheimer's Unit No
VAN BUREN	MO 63965-7259	Level of Care: ALF**	<b>Bed Capacity</b> 26
Mailing Address PO BOX 780		County CARTER	DMH Licensed Yes
VAN BUREN	MO 63965-0780	Region 2	Facility Number 29947
SMILEY MANOR LLC			
5415 THEKLA AVE		<b>Telephone</b> (314) 932-1360	Alzheimer's Unit No
SAINT LOUIS	MO 63120-2513	Level of Care: RCF	Bed Capacity 20
Mailing Address 5415 THEKLA AVE		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63120-2513	Region 7	Facility Number 04078
Danie Boom	00120 2010	region ,	zaemy ramoer 04076
SMILEY MANOR WEST, LLC			
1119 GOODFELLOW BLVD		<b>Telephone</b> (314) 833-3238	Alzheimer's Unit No
SAINT LOUIS	MO 63112-	Level of Care: RCF	<b>Bed Capacity</b> 27
Mailing Address 1119 GOODFELLOW		County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63112-	Region 7	Facility Number 31147

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SONSHINE MANOR			
300 SOUTH COTTONWOOD AVE	<b>Telephone</b> (417) 732-2929	Alzheimer's Unit	No
REPUBLIC MO 65738-2093	Level of Care: SNF	Bed Capacity	69
Mailing Address 300 SOUTH COTTONWOOD AVE	County GREENE	DMH Licensed	No
REPUBLIC MO 65738-2093	Region 1 Medicare/Medicaid	Facility Number	16723
SOUTH COUNTY NURSING HOME, INC			
1101 WEST OUTER 21 RD	<b>Telephone</b> (636) 296-5455	Alzheimer's Unit	No
ARNOLD MO 63010-4644	Level of Care: SNF	Bed Capacity	153
Mailing Address 1101 WEST OUTER 21 RD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4644	Region 2 Medicare/Medicaid	Facility Number	03650
ARTOLD MO 03010-4044	Region 2 Medicare/Medicald	Pacinty Number	03030
SOUTH HAMPTON PLACE			
4700 BRANDON WOODS	<b>Telephone</b> (573) 874-3674	Alzheimer's Unit	No
COLUMBIA MO 65203-7169	Level of Care: SNF	<b>Bed Capacity</b>	100
Mailing Address 4700 BRANDON WOODS	County BOONE	DMH Licensed	No
COLUMBIA MO 65203-7169	Region 6 Medicare/Medicaid	Facility Number	19799
SOUTH HAVEN RESIDENTIAL CARE CENTER, LLC			
10462 AIRPORT RD	<b>Telephone</b> (573) 438-4150	Alzheimer's Unit	No
MINERAL POINT MO 63660-9325	Level of Care: RCF*	Bed Capacity	20
Mailing Address 10462 AIRPORT RD	County WASHINGTON	DMH Licensed	Yes
MINERAL POINT MO 63660-9325	Region 2	Facility Number	10529
SOUTH POINTE - ASSISTED LIVING BY AMERICARE			
SOUTH TORVIE - ADDISTED LIVING DT AMERICARE			
5125 OLD HWY 100	Telephone (636) 239-0670	Alzheimer's Unit	Yes
5125 OLD HWY 100 WASHINGTON MO 63090.3855	Telephone (636) 239-0670	Alzheimer's Unit	Yes
WASHINGTON MO 63090-3855	Level of Care: ALF**	<b>Bed Capacity</b>	72
	•		
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100	Level of Care: ALF** County FRANKLIN	Bed Capacity DMH Licensed	72 No
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC	Level of Care: ALF** County FRANKLIN Region 6	Bed Capacity DMH Licensed Facility Number	72 No
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	72 No 13735
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC  951 CREAMERY ROAD  WEST PLAINS MO 65775-6052	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	72 No 13735 No 32
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052  Mailing Address PO BOX 88	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	72 No 13735
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC  951 CREAMERY ROAD  WEST PLAINS MO 65775-6052	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	72 No 13735 No 32
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052  Mailing Address PO BOX 88  WEST PLAINS MO 65775-0088	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	72 No 13735 No 32 Yes
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567
WASHINGTON       MO       63090-3855         Mailing Address       5125 OLD HWY 100         WASHINGTON       MO       63090-3855         SOUTH VIEW HEALTH CARE, LLC         951 CREAMERY ROAD         WEST PLAINS       MO       65775-6052         Mailing Address PO BOX 88         WEST PLAINS       MO       65775-0088         SOUTHAVEN         612 SOUTH BYPASS EAST         KENNETT       MO       63857-3240	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	72 No 13735 No 32 Yes 23567
WASHINGTON MO 63090-3855  Mailing Address 5125 OLD HWY 100  WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052  Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST KENNETT MO 63857-3240  Mailing Address 612 SOUTH BYPASS EAST	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF* County DUNKLIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	72 No 13735 No 32 Yes 23567
WASHINGTON       MO       63090-3855         Mailing Address       5125 OLD HWY 100         WASHINGTON       MO       63090-3855         SOUTH VIEW HEALTH CARE, LLC         951 CREAMERY ROAD         WEST PLAINS       MO       65775-6052         Mailing Address PO BOX 88         WEST PLAINS       MO       65775-0088         SOUTHAVEN         612 SOUTH BYPASS EAST         KENNETT       MO       63857-3240	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	72 No 13735 No 32 Yes 23567
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST KENNETT MO 63857-3240 Mailing Address 612 SOUTH BYPASS EAST KENNETT MO 63857-3240  SOUTHBROOK NURSING CENTER	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF* County DUNKLIN Region 2	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST KENNETT MO 63857-3240 Mailing Address 612 SOUTH BYPASS EAST KENNETT MO 63857-3240  SOUTHBROOK NURSING CENTER 1101 HAZEL LANE	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF* County DUNKLIN Region 2  Telephone (573) 756-6658	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567 No 24336
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST KENNETT MO 63857-3240 Mailing Address 612 SOUTH BYPASS EAST KENNETT MO 63857-3240  SOUTHBROOK NURSING CENTER 1101 HAZEL LANE FARMINGTON MO 63640-1920	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF* County DUNKLIN Region 2  Telephone (573) 756-6658 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567 No 24336
WASHINGTON Mailing Address 5125 OLD HWY 100 WASHINGTON MO 63090-3855  SOUTH VIEW HEALTH CARE, LLC 951 CREAMERY ROAD WEST PLAINS MO 65775-6052 Mailing Address PO BOX 88 WEST PLAINS MO 65775-0088  SOUTHAVEN 612 SOUTH BYPASS EAST KENNETT MO 63857-3240 Mailing Address 612 SOUTH BYPASS EAST KENNETT MO 63857-3240  SOUTHBROOK NURSING CENTER 1101 HAZEL LANE	Level of Care: ALF** County FRANKLIN Region 6  Telephone (417) 255-9322 Level of Care: RCF* County HOWELL Region 1  Telephone (573) 888-9213 Level of Care: RCF* County DUNKLIN Region 2  Telephone (573) 756-6658	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	72 No 13735 No 32 Yes 23567 No 24336

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SOUTHGATE LIVING CENTER				
500 TRUMAN BLVD		<b>Telephone</b> (573) 333-5150	Alzheimer's Unit No	С
CARUTHERSVILLE	MO 63830-1261	Level of Care: SNF	Bed Capacity 94	4
Mailing Address 500 TRUMAN BLVD		County PEMISCOT	DMH Licensed No	0
CARUTHERSVILLE	MO 63830-1261	Region 2 Medicare/Medicaid	Facility Number 01081	1
CONTRICINE TOWARD HOUSE				
SOUTHSIDE TOWNE HOUSE		TO 1 1 (572) 591 2202	AT TOTAL AS TIME	_
510 SOUTH WASHINGTON	MO (52(5 279)	<b>Telephone</b> (573) 581-3203	Alzheimer's Unit No	
MEXICO	MO 65265-2786	Level of Care: RCF* County AUDRAIN	Bed Capacity 12 DMH Licensed Yes	
Mailing Address PO BOX 6 MEXICO	MO 65265 0006			
MEAICO	MO 65265-0006	Region 5	Facility Number 16987	/
SOUTHVIEW ASSISTED LIVING				
9916 REAVIS ROAD		<b>Telephone</b> (314) 544-4440	Alzheimer's Unit Yes	
AFFTON	MO 63123-5314	Level of Care: ALF**	Bed Capacity 116	
Mailing Address 9916 REAVIS RD		County SAINT LOUIS COUNTY	DMH Licensed No	О
AFFTON	MO 63123-5314	Region 7	Facility Number 28446	5
SPECIAL FORCE FAMILY MINISTI	RIES			
428 SOUTH HARRISON ST		<b>Telephone</b> (417) 725-7917	Alzheimer's Unit No	Э
NIXA	MO 65714-7809	Level of Care: RCF	Bed Capacity 12	2
Mailing Address PO BOX 882		County CHRISTIAN	DMH Licensed Yes	s
NIXA	MO 65714-0882	Region 1	Facility Number 18764	4
SPENCER PLACE - ASSISTED LIVI	NG BY AMERICARE			
265 SPENCER RD		<b>Telephone</b> (636) 441-6662	Alzheimer's Unit No	С
SAINT PETERS	MO 63376-2430	Level of Care: ALF**	Bed Capacity 74	4
Mailing Address 265 SPENCER RD		County SAINT CHARLES	DMH Licensed No	o
SAINT PETERS	MO 63376-2430	Region 5	Facility Number 13294	4
SPRING MANOR				
3610 PALM ST		<b>Telephone</b> (314) 533-3111	Alzheimer's Unit No	Э
SAINT LOUIS	MO 63107-2505	Level of Care: ALF**	Bed Capacity 94	4
Mailing Address 3610 PALM ST		County SAINT LOUIS CITY	DMH Licensed Yes	S
SAINT LOUIS	MO 63107-2505	Region 7	Facility Number 28552	2
SPRING RIDGE - ASSISTED LIVING	G BY AMERICARE			
2828 SOUTH MEADOWBROOK		<b>Telephone</b> (417) 889-7100	Alzheimer's Unit No	Э
SPRINGFIELD	MO 65807-5925	Level of Care: ALF**	Bed Capacity 44	4
Mailing Address 2828 SOUTH MEADO	OWBROOK	County GREENE	DMH Licensed No.	Э
SPRINGFIELD	MO 65807-5925	Region 1	Facility Number 19713	3
SPRING RIVER CHRISTIAN VILLA	GE, INC			
201 S NORTHPARK LN		<b>Telephone</b> (417) 623-4313	Alzheimer's Unit No	Э
JOPLIN	MO 64801-8426	Level of Care: SNF	Bed Capacity 120	
Mailing Address 201 S NORTHPARK I	LN	County JASPER	DMH Licensed No.	Э

Medicare/Medicaid

**Facility Number** 

14251

MO 64801-8426

**JOPLIN** 

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SPRING RIVER CHRISTIAN VILLA 201 S NORTHPARK LN	GE, INC	<b>Telephone</b> (417) 623-4313	Alzheimer's Unit No
JOPLIN	MO 64801-8426	- · · · · · · · · · · · · · · · · · · ·	
			Bed Capacity 93
Mailing Address 201 S NORTHPARK		County JASPER	DMH Licensed No
JOPLIN	MO 64801-8426	Region 1	Facility Number 14251
SPRING VALLEY ASSISTED LIVIN	G		
2915 SOUTH FREMONT AVE		<b>Telephone</b> (417) 883-4022	Alzheimer's Unit No
SPRINGFIELD	MO 65804-3608	Level of Care: ALF	Bed Capacity 40
Mailing Address 2915 SOOUTH FREM	MONT AVE	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-3608	Region 1	Facility Number 00144
SPRING VALLEY HEALTH & REHA	ABILITATION CENTER		
2915 SOUTH FREMONT AVE		<b>Telephone</b> (417) 883-4022	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-3608	Level of Care: SNF	Bed Capacity 194
Mailing Address 2915 SOUTH FREMO	ONT AVE	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65804-3608	Region 1 Medicare/Medicaid	Facility Number 00144
SPRINGFIELD REHABILITATION (2800 S FORT AVE SPRINGFIELD	& HEALTH CARE CENTER  MO 65807-3480	Telephone (417) 882-0035 Level of Care: SNF	Alzheimer's Unit No Bed Capacity 146
Mailing Address PO BOX 3438 GS	110 03007 3100		DMH Licensed No
SPRINGFIELD	MO (5909 2429		
SPRINGFIELD	MO 65808-3438	Region 1 Medicare/Medicaid	Facility Number 07460
SPRINGFIELD SKILLED CARE CE	NTER		
2401 W GRAND ST		<b>Telephone</b> (417) 864-4545	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4967	Level of Care: SNF	Bed Capacity 120
Mailing Address 2401 W GRAND ST		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65802-4967	Region 1 Medicare/Medicaid	Facility Number 09756
SPRINGFIELD VILLA			
1100 EAST MONTCLAIR		<b>Telephone</b> (417) 820-8500	Alzheimer's Unit Yes
SPRINGFIELD	MO 65807-5076	Level of Care: SNF	Bed Capacity 146
Mailing Address 1100 EAST MONTCL	_AIR	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-5076	Region 1 Medicare/Medicaid	Facility Number 05280
SPRINGHOUSE VILLAGE EAST, LI 3877 EAST FARM ROAD 132	LC	<b>Telephone</b> (417) 877-1717	Alzheimer's Unit Yes
	MO (5902	. ,	
SPRINGFIELD	MO 65802-	Level of Care: ALF**	Bed Capacity 100
Mailing Address 3877 EAST FARM RO		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-	Region 1	Facility Number 32469
SSTAR LLC			
125 ANNA AVE, #18		<b>Telephone</b> (636) 462-6979	Alzheimer's Unit No
TROY	MO 63379-2402	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address 125 ANNA AVE, #18		County LINCOLN	<b>DMH Licensed</b> Yes
TROY	MO 63379-2402	Region 5	Facility Number 16992

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ST AGNES HOME			
10341 MANCHESTER RD	<b>Telephone</b> (314) 965-7616	Alzheimer's Unit	No
KIRKWOOD MO 63122-1520	Level of Care: ICF	Bed Capacity	150
Mailing Address 10341 MANCHESTER RD	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO 63122-1520	Region 7	Facility Number	07481
ST ANDREW'S ASSISTED LIVING OF BRIDGETON			
11325 ST CHARLES ROCK RD	<b>Telephone</b> (314) 209-1177	Alzheimer's Unit	No
BRIDGETON MO 63044-2722	Level of Care: ALF**	Bed Capacity	35
Mailing Address 11325 ST CHARLES ROCK RD	County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON MO 63044-2722	Region 7	Facility Number	22810
IND 03044-2722	Region /	racinty Number	22010
ST ANDREW'S AT FRANCIS PLACE			
400 SUMMERVILLE BLVD	<b>Telephone</b> (636) 938-5151	Alzheimer's Unit	No
EUREKA MO 63025-2316	Level of Care: SNF	Bed Capacity	106
Mailing Address 400 SUMMERVILLE BLVD	County SAINT LOUIS COUNTY	DMH Licensed	No
EUREKA MO 63025-2316	Region 7 Medicare/Medicaid	Facility Number	06430
ST ANDREW'S AT NEW FLORENCE			
515 PICNIC ST	<b>Telephone</b> (573) 415-9333	Alzheimer's Unit	No
NEW FLORENCE MO 63363-2223	Level of Care: SNF	Bed Capacity	87
Mailing Address 515 PICNIC ST	<b>County</b> MONTGOMERY	DMH Licensed	No
NEW FLORENCE MO 63363-2223	Region 6 Medicare/Medicaid	Facility Number	05723
CT ANDDEWIG AT NEW ELOBENCE			
ST ANDREW'S AT NEW FLORENCE 515 PICNIC ST	Tolonhone (572) 415 0222	Alzheimer's Unit	No
NEW FLORENCE MO 63363-2223	<b>Telephone</b> (573) 415-9333 <b>Level of Care:</b> RCF*	Bed Capacity	No 33
Mailing Address 515 PICNIC ST	County MONTGOMERY	DMH Licensed	No
NEW FLORENCE MO 63363-2223	•		
NEW FLORENCE MIO 05505-2225	Region 6	Facility Number	05723
ST ANN ASSISTED LIVING CENTER			
10441 INTERNATIONAL PLAZA DR	<b>Telephone</b> (314) 423-1254	Alzheimer's Unit	No
SAINT ANN MO 63074-1805	Level of Care: ALF	Bed Capacity	40
Mailing Address 10441 INTERNATIONAL PLAZA DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT ANN MO 63074-1805	Region 7	Facility Number	21994
ST ANTHONY'S			
1010 EAST 68TH STREET	<b>Telephone</b> (816) 846-0870	Alzheimer's Unit	Yes
KANSAS CITY MO 64131-1311	Level of Care: ALF**	<b>Bed Capacity</b>	81
Mailing Address 1010 EAST 68TH STREET	<b>County</b> JACKSON	DMH Licensed	No
KANSAS CITY MO 64131-1311	Region 3	Facility Number	32075
ST CLAIR NURSING CENTER			
1035 PLAZA COURT NORTH	<b>Telephone</b> (636) 629-2100	Alzheimer's Unit	No
SAINT CLAIR MO 63077-1129	Level of Care: SNF	Bed Capacity	79
Mailing Address 1035 PLAZA CT NORTH	County FRANKLIN	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

13744

MO 63077-1129

SAINT CLAIR

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ST ELIZABETH CARE CENTER			
649 SOUTH WALNUT ST		<b>Telephone</b> (573) 493-2215	Alzheimer's Unit No
SAINT ELIZABETH MO	65075-2440	Level of Care: SNF	<b>Bed Capacity</b> 63
Mailing Address 649 SOUTH WALNUT ST		County MILLER	<b>DMH Licensed</b> No
SAINT ELIZABETH MO	65075-2440	Region 6 Medicare/Medicaid	Facility Number 07523
ST ELIZABETH HALL			
325 NORTH NEWSTEAD AVE		<b>Telephone</b> (314) 652-9525	Alzheimer's Unit No
SAINT LOUIS MO	63108-2707	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 325 N NEWSTEAD AVE		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS MO	63108-2707	Region 7	Facility Number 07516
		C	•
ar ar average and resident and a second	DV 1 PPDV. C. DV		
ST FRANCIS PARK - ASSISTED LIVING	BY AMERICARE	T. I (572) 000 1100	
1806 SAINT FRANCIS ST	(2057, 1570	Telephone (573) 888-1188	Alzheimer's Unit No
	63857-1568	Level of Care: ALF**	Bed Capacity 50
Mailing Address PO BOX 629	(2057, 0/20	County DUNKLIN	DMH Licensed No
KENNETT MO	63857-0629	Region 2	Facility Number 18903
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
FARMINGTON MO	63640-3428	Level of Care: RCF	Bed Capacity 11
Mailing Address 1180 OLD JACKSON RD		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON MO	63640-3428	Region 2	Facility Number 21512
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
	63640-3428	Level of Care: RCF*	Bed Capacity 29
Mailing Address 1180 OLD JACKSON RD		County SAINT FRANCOIS	DMH Licensed Yes
	63640-3428	Region 2	Facility Number 21512
		110g.v.1	
ST FRANCOIS MANOR			
1180 OLD JACKSON RD	50 5 10 0 10 0	<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
	63640-3428	Level of Care: SNF	Bed Capacity 118
Mailing Address 1180 OLD JACKSON RD	62610.2420	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON MO	63640-3428	Region 2 Medicare/Medicaid	Facility Number 21512
ST GENEVIEVE CARE CENTER, INC			
1010 STE GENEVIEVE DR		<b>Telephone</b> (573) 883-5725	Alzheimer's Unit No
SAINTE GENEVIEVE MO	63670-1447	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 426		County SAINTE GENEVIEVE	DMH Licensed No
SAINTE GENEVIEVE MO	63670-0426	Region 2 Medicare/Medicaid	Facility Number 03254
ST JAMES LIVING CENTER			
415 SIDNEY ST		<b>Telephone</b> (573) 265-8921	Alzheimer's Unit Yes
	65559-1070	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 69	00007 1070	County PHELPS	DMH Licensed No
	65559-0069	Region 6 Medicare/Medicaid	Facility Number 05238
STILL STUTED MO	05557 0007	region o medicale/medicald	1 401111 111111111111111111111111111111

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ST JOE MANOR				
10 LAKE DR		<b>Telephone</b> (573) 358-2800	Alzheimer's Unit	No
BONNE TERRE	MO 63628-1820	Level of Care: ALF**	Bed Capacity	36
Mailing Address 10 LAKE DR		County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE	MO 63628-1820	Region 2	Facility Number 2	22664
ST JOE MANOR				
10 LAKE DR		<b>Telephone</b> (573) 358-2800	Alzheimer's Unit	Yes
BONNE TERRE	MO 63628-1820	Level of Care: ALF	<b>Bed Capacity</b>	10
Mailing Address 10 LAKE DR		County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE	MO 63628-1820	Region 2	Facility Number 2	22664
ST JOE MANOR				
10 LAKE DR		<b>Telephone</b> (573) 358-2800	Alzheimer's Unit	No
BONNE TERRE	MO 63628-1820	Level of Care: SNF	Bed Capacity	145
Mailing Address 10 LAKE DR	WO 03028-1820	County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE	MO 63628-1820	Region 2 Medicare/Medicaid		22664
BONNE TERRE	WIO 03020-1020	Region 2 Medicare/Medicard	racinty Number	22004
ST JOHNS PLACE				
3333 BROWN ROAD		<b>Telephone</b> (314) 426-2211	Alzheimer's Unit	No
SAINT LOUIS	MO 63114-4327	Level of Care: SNF	Bed Capacity	94
Mailing Address 3333 BROWN RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63114-4327	Region 7 Medicare/Medicaid	Facility Number 1	18454
ST JOSEPH				
3002 N 18TH ST		<b>Telephone</b> (816) 364-4200	Alzheimer's Unit	No
SAINT JOSEPH	MO 64505-1872	Level of Care: SNF	<b>Bed Capacity</b>	180
Mailing Address 3002 N 18TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64505-1872	Region 4 Medicare/Medicaid	Facility Number (	08000
ST JOSEPH CHATEAU				
811 NORTH 9TH ST		<b>Telephone</b> (816) 233-5164	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-1651	Level of Care: SNF	Bed Capacity	69
Mailing Address 811 NORTH 9TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64508-1651	Region 4 Medicare/Medicaid		)7532
		6	·	•
ST JOSEPH SENIOR LIVING		m		
1317 NORTH 36TH ST		<b>Telephone</b> (816) 676-1630	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-2359	Level of Care: SNF	Bed Capacity	110
Mailing Address 1317 N 36TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-2359	Region 4 Medicare/Medicaid	Facility Number (	00526
ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63111-2023	Level of Care: ALF**	Bed Capacity	23
Mailing Address 5408 SOUTH BROAL	DWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2023	Region 7	Facility Number (	)7585

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ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2023	Level of Care: ICF	Bed Capacity	24
Mailing Address 5408 S BROADWAY	110 03111 2023	County SAINT LOUIS CITY	DMH Licensed	No.
SAINT LOUIS	MO 63111-2023	Region 7	Facility Number	07585
J.M.Y BOOK	333 3311 2323	region ,	2 womay 1 (wm. 202	07303
ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2023	Level of Care: SNF	<b>Bed Capacity</b>	24
Mailing Address 5408 SOUTH BROAD	OWAY	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2023	Region 7 Medicaid	Facility Number	07585
ST LOUIS HILLS ASSISTED LIVING	C AND MEMORY CARE			
6543 CHIPPEWA ST	TAND MEMORI CARE	<b>Telephone</b> (314) 647-6600	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63109-4100	Level of Care: ALF**	Bed Capacity	181
Mailing Address 6543 CHIPPEWA ST	110 03107 4100	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63109-4100	Region 7	Facility Number	07594
J.M.Y Book	110 0010) 1100	region ,	Tuessey Tussian	01374
ST LOUIS PLACE HEALTH & REHA	ABILITATION			
2600 REDMAN RD		<b>Telephone</b> (314) 355-8585	Alzheimer's Unit	No
SAINT LOUIS	MO 63136-5863	Level of Care: SNF	Bed Capacity	120
Mailing Address 2600 REDMAN RD		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63136-5863	Region 7 Medicare/Medicaid	Facility Number	18697
ST LUKE'S CARE CENTER, INC				
1220 EAST FAIRVIEW AVE		<b>Telephone</b> (417) 358-9084	Alzheimer's Unit	No
CARTHAGE	MO 64836-3122	Level of Care: ALF**	Bed Capacity	41
Mailing Address 1220 EAST FAIRVIE	W AVE	County JASPER	DMH Licensed	No
CARTHAGE				110
CAKTHAGE	MO 64836-3122	Region 1	Facility Number	07606
	MO 64836-3122	Region 1	Facility Number	
ST LUKE'S NURSING CENTER, INC	MO 64836-3122	Ü	·	07606
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE	MO 64836-3122	<b>Telephone</b> (417) 358-9084	Alzheimer's Unit	07606 Yes
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE	MO 64836-3122 MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF	Alzheimer's Unit Bed Capacity	07606 Yes 95
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE	MO 64836-3122 MO 64836-3122	<b>Telephone</b> (417) 358-9084	Alzheimer's Unit	07606 Yes
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIE CARTHAGE	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF County JASPER	Alzheimer's Unit Bed Capacity DMH Licensed	07606 Yes 95 No
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE ST PETERS MANOR CARE CENTER	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 07606
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIE CARTHAGE ST PETERS MANOR CARE CENTER 230 SPENCER RD	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	07606  Yes 95 No 07606
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	07606  Yes 95 No 07606
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS Mailing Address 230 SPENCER RD	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122  R  MO 63376-2425	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF County SAINT CHARLES	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 07606 NO 96 No
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	07606  Yes 95 No 07606
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS Mailing Address 230 SPENCER RD	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122  R  MO 63376-2425  MO 63376-2425	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 07606 NO 96 No
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIET CARTHAGE  ST PETERS MANOR CARE CENTED 230 SPENCER RD SAINT PETERS Mailing Address 230 SPENCER RD SAINT PETERS	MO 64836-3122  MO 64836-3122  W AVE  MO 64836-3122  R  MO 63376-2425  MO 63376-2425	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF County SAINT CHARLES	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 07606 NO 96 No
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE  ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS Mailing Address 230 SPENCER RD SAINT PETERS  ST SOPHIA HEALTH & REHABILIT 936 CHARBONIER RD FLORISSANT	MO 64836-3122  MO 64836-3122  WAVE  MO 64836-3122  R  MO 63376-2425  MO 63376-2425  CATION CENTER  MO 63031-5220	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	95 No 07606 NO 96 No 07613
ST LUKE'S NURSING CENTER, INC 1220 EAST FAIRVIEW AVE CARTHAGE Mailing Address 1220 EAST FAIRVIEY CARTHAGE  ST PETERS MANOR CARE CENTER 230 SPENCER RD SAINT PETERS Mailing Address 230 SPENCER RD SAINT PETERS  ST SOPHIA HEALTH & REHABILIT 936 CHARBONIER RD	MO 64836-3122  MO 64836-3122  WAVE  MO 64836-3122  R  MO 63376-2425  MO 63376-2425  CATION CENTER  MO 63031-5220	Telephone (417) 358-9084 Level of Care: SNF County JASPER Region 1 Medicare/Medicaid  Telephone (636) 441-2750 Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (314) 831-4800	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 07606 NO 96 No 07613

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STEELVILLE SENIOR LIVING			
311 NORTH SPRING ST		<b>Telephone</b> (573) 260-8850	Alzheimer's Unit No
STEELVILLE	MO 65565-5089	Level of Care: ALF	Bed Capacity 21
Mailing Address 311 NORTH SPRING		County CRAWFORD	DMH Licensed No
STEELVILLE	MO 65565-5089	Region 6	Facility Number 02860
STEEL VILLE	110 03303 3007	region 0	racinty Number 02800
STEELVILLE SENIOR LIVING			
311 NORTH SPRING ST		<b>Telephone</b> (573) 260-8850	Alzheimer's Unit No
STEELVILLE	MO 65565-5089	Level of Care: SNF	Bed Capacity 72
Mailing Address 311 NORTH SPRING	ST	County CRAWFORD	DMH Licensed No
STEELVILLE	MO 65565-5089	Region 6 Medicare/Medicaid	Facility Number 02860
STONEBRIDGE ADAMS STREET			
1024 ADAMS ST		<b>Telephone</b> (573) 635-1320	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-3408	Level of Care: SNF	Bed Capacity 120
	WIO 03101-3408		
Mailing Address 1024 ADAMS ST	MO (5101 2400	County COLE	DMH Licensed No
JEFFERSON CITY	MO 65101-3408	Region 6 Medicare/Medicaid	Facility Number 01339
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		<b>Telephone</b> (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: RCF*	Bed Capacity 40
Mailing Address 2601 FAIR ST		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3525	Region 4	Facility Number 03833
		Region	2 4011109 2 141111002 03033
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		<b>Telephone</b> (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: SNF	<b>Bed Capacity</b> 75
Mailing Address 2601 FAIR ST		County LIVINGSTON	<b>DMH Licensed</b> No
CHILLICOTHE	MO 64601-3525	Region 4 Medicare/Medicaid	Facility Number 03833
STONEBRIDGE DESOTO			
1550 VILLAS DR		<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: RCF*	Bed Capacity 80
Mailing Address 1550 VILLAS DR	555 55525 2555	County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2	Facility Number 13501
		Region -	18801
STONEBRIDGE DESOTO			
1550 VILLAS DR		<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: SNF	<b>Bed Capacity</b> 56
Mailing Address 1550 VILLAS DR		County JEFFERSON	<b>DMH Licensed</b> No
DE SOTO	MO 63020-2586	Region 2 Medicare/Medicaid	Facility Number 13501
STONEBRIDGE FLORISSANT			
6768 NORTH HIGHWAY 67		<b>Telephone</b> (314) 741-9101	Alzheimer's Unit No
FLORISSANT	MO 63034-2742	Level of Care: SNF	Bed Capacity 120
Mailing Address 6768 NORTH HWY 6		County SAINT LOUIS COUNTY	DMH Licensed No
FLORISSANT	MO 63034-2742	Region 7 Medicare/Medicaid	Facility Number 14200
	1.10 000012/12	region / micultart/micultaru	

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STONEBRIDGE HERMANN				
1800 WEIN ST		<b>Telephone</b> (573) 486-3155	Alzheimer's Unit	No
HERMANN	MO 65041-1601	Level of Care: ALF	Bed Capacity	18
Mailing Address PO BOX 468		County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-0468	Region 6	Facility Number	02690
STONEBRIDGE HERMANN				
1800 WEIN ST		<b>Telephone</b> (573) 486-3155	Alzheimer's Unit	No
HERMANN	MO 65041-1601	Level of Care: SNF	Bed Capacity	118
Mailing Address PO BOX 468	MC 05011 1001	County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-0468	Region 6 Medicare/Medicaid	Facility Number	02690
STONEBRIDGE LAKE OZARK		T. I. I. (572) 202 0000	A11	N
872 COLLEGE BLVD	NO 55055 0400	<b>Telephone</b> (573) 302-0900	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-8408	Level of Care: RCF*	Bed Capacity	40
Mailing Address 872 COLLEGE BLVD		County MILLER	DMH Licensed	No
OSAGE BEACH	MO 65065-8408	Region 6	Facility Number	20926
STONEBRIDGE LAKE OZARK				
872 COLLEGE BLVD		<b>Telephone</b> (573) 302-0900	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-8408	Level of Care: SNF	Bed Capacity	66
Mailing Address 872 COLLEGE BLVD	)	County MILLER	DMH Licensed	No
OSAGE BEACH	MO 65065-8408	Region 6 Medicare/Medicaid	Facility Number	20926
STONEBRIDGE MARBLE HILL				
702 HIGHWAY 34 WEST		<b>Telephone</b> (573) 238-2614	Alzheimer's Unit	No
MARBLE HILL	MO 63764-4301	Level of Care: SNF	Bed Capacity	98
Mailing Address 702 HWY 34 WEST		County BOLLINGER	DMH Licensed	No
MARBLE HILL	MO 63764-4301	Region 2 Medicare/Medicaid	Facility Number	10864
STONEBRIDGE MARYLAND HEIGH	HTS			
2963 DODDRIDGE AVE		<b>Telephone</b> (314) 291-4557	Alzheimer's Unit	No
MARYLAND HEIGHTS	MO 63043-1736	Level of Care: SNF	Bed Capacity	223
Mailing Address 2963 DODDRIDGE A		County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS	MO 63043-1736	Region 7 Medicare/Medicaid	Facility Number	00855
WINTER TO TEXTIFIE	110 03013 1730	Region / Medicare/Medicard	Tuellity Ivallises	00033
STONEBRIDGE OAK TREE				
3108 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3063	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-4918	Level of Care: ALF	Bed Capacity	80
Mailing Address 3108 WEST TRUMAN	N BLVD	County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-4918	Region 6	Facility Number	10300
STONEBRIDGE OAK TREE				
3108 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3063	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-4918	Level of Care: SNF	Bed Capacity	42
Mailing Address 3108 WEST TRUMAN		County COLE	DMH Licensed	No
THE PROPERTY OF THE PROPERTY O	.,	County COLL	Zivili Licciiscu	110

Medicare/Medicaid

**Facility Number** 

10300

MO 65109-4918

JEFFERSON CITY

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STONEBRIDGE OWENSVILLE 1016 W HIGHWAY 28 OWENSVILLE Mailing Address PO BOX 593	MO 65066-1677	Telephone (573) 437-6877 Level of Care: SNF County GASCONADE	Alzheimer's Unit Yes Bed Capacity 131 DMH Licensed No
OWENSVILLE	MO 65066-0593	Region 6 Medicare/Medicaid	Facility Number 19051
STONEBRIDGE VILLA MARIE 1030 EDMONDS ST JEFFERSON CITY Mailing Address 1030 EDMONDS ST	MO 65109-5213	Telephone (573) 635-3381 Level of Care: SNF County COLE	Alzheimer's Unit Yes Bed Capacity 120 DMH Licensed No
JEFFERSON CITY	MO 65109-5213	Region 6 Medicare/Medicaid	Facility Number 08282
STONEBRIDGE WESTPHALIA 1899 HIGHWAY 63 WESTPHALIA Mailing Address 1899 HWY 63 WESTPHALIA	MO 65085-2215 MO 65085-2215	Telephone (573) 455-2280 Level of Care: SNF County OSAGE Region 6 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 64 DMH Licensed No Facility Number 18653
STONEBRIDGE WESTPHALIA 1899 HIGHWAY 63 WESTPHALIA Mailing Address 1899 HWY 63 WESTPHALIA	MO 65085-2215 MO 65085-2215	Telephone (573) 455-2280 Level of Care: RCF* County OSAGE Region 6	Alzheimer's Unit No Bed Capacity 28 DMH Licensed No Facility Number 18653
STONECREST HEALTHCARE 2 HIGHWAY Y VIBURNUM Mailing Address PO BOX 707 VIBURNUM	MO 65566-0707 MO 65566-0707	Telephone (573) 244-3171 Level of Care: SNF County IRON Region 2 Medicare/Medicaid	Alzheimer's Unit No Bed Capacity 60 DMH Licensed No Facility Number 16689
STONEY RIDGE VILLAGE 25023 BOTHWELL PARK RD SEDALIA Mailing Address 25023 BOTHWELL B SEDALIA	MO 65301-0084 PARK RD MO 65301-0084	Telephone (660) 827-3993 Level of Care: RCF County PETTIS Region 6	Alzheimer's Unit No Bed Capacity 81 DMH Licensed No Facility Number 05035
STOVER'S RESIDENTIAL CARE FA 520 EAST 5TH ST MILAN Mailing Address 520 EAST 5TH ST MILAN	MO 63556-1222 MO 63556-1222	Telephone (660) 265-3262 Level of Care: RCF County SULLIVAN Region 5	Alzheimer's Unit No Bed Capacity 20 DMH Licensed Yes Facility Number 07709
STRAFFORD CARE CENTER 505 WEST EVERGREEN STRAFFORD Mailing Address 505 WEST EVERGR STRAFFORD	MO 65757-8625 EEN MO 65757-8625	Telephone (417) 736-9332 Level of Care: SNF County GREENE Region 1 Medicare/Medicaid	Alzheimer's Unit Yes Bed Capacity 78 DMH Licensed No Facility Number 21285

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STUART HOUSE, LLC THE				
117 S HICKMAN	150	<b>Telephone</b> (573) 682-3204	Alzheimer's Unit	No
CENTRALIA	MO 65240-1316	Level of Care: ICF	Bed Capacity	27
Mailing Address 117 S HICKMAN	140 - 570 40 404 5	County BOONE	DMH Licensed	No
CENTRALIA	MO 65240-1316	Region 6	Facility Number	10146
STUBBLEFIELD RETIREMENT HO	OME	m		
5349 HIGHWAY P	MO (5452 (201	<b>Telephone</b> (573) 885-3661	Alzheimer's Unit	No
CUBA	MO 65453-6281	Level of Care: RCF*	Bed Capacity	34
Mailing Address PO BOX 647	MO (5452.0647	County CRAWFORD	DMH Licensed	Yes
CUBA	MO 65453-0647	Region 6	Facility Number	17894
STURGEON RESIDENTIAL CARE				
315 E STONE ST		<b>Telephone</b> (573) 687-3012	Alzheimer's Unit	No
STURGEON	MO 65284-8907	Level of Care: RCF	Bed Capacity	20
Mailing Address PO BOX 328	1110 03204 0907	County BOONE	DMH Licensed	No.
STURGEON	MO 65284-0328	Region 6	Facility Number	07733
BIOROLON	NIO 03204 0320	Region 0	racincy (value)	07733
SUGAR CREEK - ASSISTED LIVIN	G BY AMERICARE			
161 PROFESSIONAL PARKWAY		<b>Telephone</b> (636) 528-3136	Alzheimer's Unit	Yes
TROY	MO 63379-2829	Level of Care: ALF**	Bed Capacity	60
Mailing Address 161 PROFESSIONAL	L PRKWY	County LINCOLN	DMH Licensed	No
TROY	MO 63379-2829	Region 5	Facility Number	26349
SUMMIT VILLA LIFECARE				
229 KAREN DR		<b>Telephone</b> (573) 896-8567	Alzheimer's Unit	Yes
HOLTS SUMMIT	MO 65043-2522	Level of Care: ALF**	<b>Bed Capacity</b>	50
Mailing Address 229 KAREN DR		County CALLAWAY	DMH Licensed	No
HOLTS SUMMIT	MO 65043-2522	Region 6	Facility Number	21318
CV 10				
SUMMIT, THE		T-1	A 1-1	NI-
3660 SUMMIT	MO (4111 4622	Telephone (816) 931-1196 Level of Care: SNF	Alzheimer's Unit	No
KANSAS CITY	MO 64111-4632	Level of Care: SNF County JACKSON	Bed Capacity DMH Licensed	64 No
Mailing Address 3660 SUMMIT	MO 64111 4622			
KANSAS CITY	MO 64111-4632	Region 3 Medicare/Medicaid	Facility Number	18330
SUMMITVIEW TERRACE ASSISTI	ED LIVING BY AMERICARE			
12101 EAST BANNISTER RD		<b>Telephone</b> (816) 763-6667	Alzheimer's Unit	No
KANSAS CITY	MO 64138-4913	Level of Care: ALF**	Bed Capacity	52
Mailing Address 12101 EAST BANNI		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64138-4913	Region 3	Facility Number	16311
		·	•	
SUNNY MEADOWS LIVING CENT	ER			
419 NORTH PROSPECT AVE		<b>Telephone</b> (660) 826-5353	Alzheimer's Unit	No
SEDALIA	MO 65301-2729	Level of Care: RCF	Bed Capacity	12
Mailing Address 419 N PROSPECT A		County PETTIS	DMH Licensed	Yes
SEDALIA	MO 65301-2729	Region 6	Facility Number	06527

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SUNNYHILL INDEPENDENCE CENT	ER		
3343 ARMBRUSTER ROAD		<b>Telephone</b> (636) 586-2188	Alzheimer's Unit No
DE SOTO	MO 63020-4506	Level of Care: ALF**	<b>Bed Capacity</b> 32
Mailing Address 3343 ARMBRUSTER R	RD	County JEFFERSON	<b>DMH Licensed</b> Yes
DE SOTO	MO 63020-4506	Region 2	Facility Number 29674
SUNNYHILL RESIDENTIAL CARE FA	ACILITY		
134 GRAY ST		<b>Telephone</b> (636) 931-4701	Alzheimer's Unit No
FESTUS	MO 63028-1949	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 356		<b>County</b> JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-0356	Region 2	Facility Number 07725
CHANAZIHI I C DECIDENZUAT CADE I	EA CHI HENY		
SUNNYHILLS RESIDENTIAL CARE F	FACILITY	Tolonhone (417) 259 6122	Alabaiman'a Unit No
17562 IMPERIAL RD	MO (402) 0752	Telephone (417) 358-6122 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 18
	MO 64836-8753		
Mailing Address 17562 IMPERIAL RD CARTHAGE	MO (402) 0752	County JASPER	
CARTHAGE	MO 64836-8753	Region 1	Facility Number 13351
SUNNYVIEW NURSING HOME & APA	ARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: SNF	Bed Capacity 154
Mailing Address 1311 EAST 28TH ST		County GRUNDY	DMH Licensed No
TRENTON	MO 64683-1103	Region 4 Medicare/Medicaid	Facility Number 18509
SUNNYVIEW NURSING HOME & APA	ARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: RCF*	<b>Bed Capacity</b> 38
Mailing Address 1311 EAST 28TH ST		County GRUNDY	<b>DMH Licensed</b> No
TRENTON	MO 64683-1103	Region 4	Facility Number 18509
SUNRISE NURSING & MEMORY CAR	RE		
600 EAST SUNRISE DR		<b>Telephone</b> (816) 322-1991	Alzheimer's Unit Yes
RAYMORE	MO 64083-9037	Level of Care: SNF	<b>Bed Capacity</b> 152
Mailing Address 600 EAST SUNRISE DI	R	County CASS	DMH Licensed No
RAYMORE	MO 64083-9037	Region 3 Medicare/Medicaid	Facility Number 16170
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit No
CHESTERFIELD	MO 63017-5000	Level of Care: ALF**	<b>Bed Capacity</b> 3
Mailing Address 1880 CLARKSON RD		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number 23767
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit Yes
	MO 63017-5000	Level of Care: ICF	Bed Capacity 95
Mailing Address 1880 CLARKSON RD		County SAINT LOUIS COUNTY	DMH Licensed No
	MO 63017-5000	Region 7	Facility Number 23767
		<i>9</i> ·	- = = 7.07

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SUNRISE OF DES PERES			
13460 MANCHESTER RD		<b>Telephone</b> (314) 965-3800	Alzheimer's Unit Yes
DES PERES M	O 63131-1734	Level of Care: ICF	<b>Bed Capacity</b> 102
Mailing Address 13460 MANCHESTER RI	D	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
DES PERES M	O 63131-1734	Region 7	Facility Number 24242
SUNRISE OF WEBSTER GROVES		(214) 010 7200	
45 EAST LOCKWOOD		<b>Telephone</b> (314) 918-7300	Alzheimer's Unit Yes
	O 63119-3050	Level of Care: ALF**	Bed Capacity 90
Mailing Address 45 EAST LOCKWOOD		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS M	O 63119-3050	Region 7	Facility Number 28242
SUNSET HEALTH CARE CENTER			
400 WEST PARK AVE		<b>Telephone</b> (636) 583-2252	Alzheimer's Unit No
	O 63084-1140	Level of Care: SNF	Bed Capacity 120
Mailing Address 400 WEST PARK AVE	0.000.11.0	County FRANKLIN	DMH Licensed No
· ·	O 63084-1140	Region 6 Medicare/Medicaid	Facility Number 07831
	0.00011110	Region 6 Medicare/Medicard	1 demog 1 damser 07031
SUNSET HOME			
1201 SOUTH POLK		<b>Telephone</b> (816) 449-2158	Alzheimer's Unit No
MAYSVILLE M	O 64469-4028	Level of Care: SNF	Bed Capacity 60
Mailing Address 1201 S POLK		County DEKALB	DMH Licensed No
MAYSVILLE M	O 64469-4028	Region 4 Medicare/Medicaid	Facility Number 07798
SUNSHINE ACRES			
541 ROCK ROAD		<b>Telephone</b> (573) 732-5366	Alzheimer's Unit No
	O 65441-6324	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address PO BOX 67		County CRAWFORD	<b>DMH Licensed</b> Yes
BOURBON M	O 65441-0067	Region 6	Facility Number 03540
SUNSHINE HOME CARE - WINFIELD			
499 WALNUT ST		<b>Telephone</b> (636) 668-8500	Alzheimer's Unit No
	O 63389-1138	Level of Care: RCF	Bed Capacity 49
Mailing Address PO BOX 185	00000 1100	County LINCOLN	DMH Licensed Yes
	O 63389-0185	Region 5	Facility Number 25266
WINTIED	0 03307 0103	Region 5	23200 23200
SUNSHINE VILLA			
2520 JAMES ST		<b>Telephone</b> (573) 264-2424	Alzheimer's Unit No
SCOTT CITY M	O 63780-1219	Level of Care: ALF	Bed Capacity 26
Mailing Address 2520 JAMES ST		County SCOTT	DMH Licensed Yes
_	O 63780-1219	Region 2	Facility Number 07039
SUNTERRA SPRINGS DARDENNE PRA	AIRIE		
7275 STATE HIGHWAY N		<b>Telephone</b> (636) 865-0200	Alzheimer's Unit No
	O 63368-7128	Level of Care: SNF	Bed Capacity 38
Mailing Address 7275 STATE HIGHWAY	N	County SAINT CHARLES	DMH Licensed No

Medicare

**Facility Number** 

32331

MO 63368-7128

DARDENNE PRAIRIE

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SUNTERRA SPRINGS INDEPENDEN	ICE		
19200 E 37TH TERRACE S		<b>Telephone</b> (816) 335-3008	Alzheimer's Unit No
INDEPENDENCE	MO 64057-8324	Level of Care: SNF	Bed Capacity 38
Mailing Address 19200 E 37TH TERRA		County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64057-8324	Region 3 Medicare	Facility Number 30894
SUNTERRA SPRINGS SPRINGFIELI	)		
4935 S NATIONAL AVE	,	<b>Telephone</b> (417) 720-8050	Alzheimer's Unit No
SPRINGFIELD	MO 65810-2989	Level of Care: SNF	Bed Capacity 38
Mailing Address 4935 S NATIONAL A		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65810-2989	Region 1 Medicare	Facility Number 31273
SI KINGI ILLID	WIO 03010-2707	Region 1 Medicare	racinty Number 31273
SUPERIOR MANOR OF DOWNTOW	N, LLC		
1501 CLINTON STREET		<b>Telephone</b> (314) 921-2625	Alzheimer's Unit No
SAINT LOUIS	MO 63106-4100	Level of Care: RCF	Bed Capacity 40
Mailing Address 1501 CLINTON STRE	ET	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63106-4100	Region 7	Facility Number 30136
SUPERIOR MANOR OF FESTUS, LL	C		
12827 HIGHWAY TT		<b>Telephone</b> (314) 624-5575	Alzheimer's Unit No
FESTUS	MO 63028-4351	Level of Care: SNF	<b>Bed Capacity</b> 55
Mailing Address 12827 HWY TT		County JEFFERSON	<b>DMH Licensed</b> No
FESTUS	MO 63028-4351	Region 2 Medicare/Medicaid	Facility Number 06820
SURREY PLACE ST LUKE'S HOSPIT	TAL SKILLED NURSING		
14701 OLIVE BLVD	THE SKIELED IVERSITY	<b>Telephone</b> (314) 542-3300	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-2221	Level of Care: SNF	Bed Capacity 130
Mailing Address 14701 OLIVE BLVD	110 03017 2221	County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-2221	Region 7 Medicare/Medicaid	Facility Number 15467
CHESTERVILLE	1410 03017 2221	Region / Wedicai C/Medicaid	Taciney (vanise)
SWEET SPRINGS VILLA			
518 E MARSHALL		<b>Telephone</b> (660) 335-6391	Alzheimer's Unit No
SWEET SPRINGS	MO 65351-9756	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 518 E MARSHALL		County SALINE	<b>DMH Licensed</b> No
SWEET SPRINGS	MO 65351-9756	Region 5 Medicare/Medicaid	Facility Number 05378
CUITET CHEEV DECIDENDIAL CAR	e Centred		
SWIFT CREEK RESIDENTIAL CARI 1673 HIGHWAY 53	E CENTER	T-1 (572) 776 6501	Al-lada No
	MO (2001 4122	<b>Telephone</b> (573) 776-6501	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-4132	Level of Care: RCF*	Bed Capacity 12  DMH Licensed Yes
Mailing Address 1673 HIGHWAY 53	MO (2001 4122	County BUTLER	
POPLAR BLUFF	MO 63901-4132	Region 2	Facility Number 20386
SWITZER RESIDENTIAL CARE			
3260 MYSTIC LANE		<b>Telephone</b> (573) 785-9399	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-3067	Level of Care: RCF*	Bed Capacity 20
Mailing Address 3260 MYSTIC LANE		County BUTLER	DMH Licensed Yes
POPLAR BLUFF	MO 63901-3067	Region 2	Facility Number 20739

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SYLVAN HOUSE				
30 SHERMAN RD		<b>Telephone</b> (314) 892-2212	Alzheimer's Unit	No
SAINT LOUIS	MO 63125-4125	Level of Care: RCF	Bed Capacity	40
Mailing Address 30 SHERMAN RD		County SAINT LOUIS COUNTY	DMH Licensed	Yes
SAINT LOUIS	MO 63125-4125	Region 7	Facility Number	15078
		1109.01	•	
SYLVIA G THOMPSON RESIDENC	E CENTER, INC			
3333 WEST TENTH ST	,	<b>Telephone</b> (660) 826-2118	Alzheimer's Unit	Yes
SEDALIA	MO 65301-2113	Level of Care: SNF	Bed Capacity	120
Mailing Address 3333 WEST TENTH	ST	County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2113	Region 6 Medicaid	Facility Number	17278
TARVIO REMARKATION & ME	ALTH CLDE			
TARKIO REHABILITATION & HEA	ALTH CARE	T. I. I. (660) 726 4116	A11 ' ! TT '	N
300 CEDAR ST	MO (4401 1174	<b>Telephone</b> (660) 736-4116	Alzheimer's Unit	No
TARKIO	MO 64491-1174	Level of Care: SNF	Bed Capacity	95 N
Mailing Address 300 CEDAR ST	MO (4401 1174	County ATCHISON	DMH Licensed	No
TARKIO	MO 64491-1174	Region 4 Medicare/Medicaid	Facility Number	00494
TEAL LAKE - ASSISTED LIVING B	Y AMERICARE			
1722 HUNTINGFIELD DR		<b>Telephone</b> (573) 582-7800	Alzheimer's Unit	No
MEXICO	MO 65265-3808	Level of Care: ALF**	Bed Capacity	42
Mailing Address 1722 HUNTINGFIEL		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-3808	Region 5	Facility Number	23534
TESSLAND RESIDENTIAL CARE F	ACILITY LLC			
24583 HIGHWAY 5		<b>Telephone</b> (660) 265-4391	Alzheimer's Unit	No
MILAN	MO 63556-2809	Level of Care: RCF	Bed Capacity	9
Mailing Address 24583 HWY 5		County SULLIVAN	DMH Licensed	Yes
MILAN	MO 63556-2809	Region 5	Facility Number	19990
THE GRANDE AT CHESTERFIELD	•			
16300 JUSTUS POST ROAD		<b>Telephone</b> (636) 778-4800	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-4608	Level of Care: ALF**	Bed Capacity	95
Mailing Address 16300 JUSTUS POST	ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-4608	Region 7	<b>Facility Number</b>	30848
THE OAKS RETIREMENT COMMU	JNITY			
127 HAMLET ROAD		<b>Telephone</b> (417) 239-1112	Alzheimer's Unit	No
BRANSON	MO 65616-7746	Level of Care: ALF**	Bed Capacity	30
Mailing Address 127 HAMLET ROAD		County TANEY	DMH Licensed	No
BRANSON	MO 65616-7746	Region 1	Facility Number	27358
THE WELLINGTON SENIOR LIVIN	NG			
1051 KENT STREET		<b>Telephone</b> (816) 222-0379	Alzheimer's Unit	YES
LIBERTY	MO 64068-2257	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1051 KENT STREET		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-2257	Region 4	<b>Facility Number</b>	33016

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THOMAS RESIDENTIAL CARE FAC	CILITY 3			
1415 OLIVE ST		<b>Telephone</b> (816) 273-5070	Alzheimer's Unit	No
SAINT JOSEPH	MO 64503-2443	Level of Care: RCF	Bed Capacity	20
Mailing Address 1415 OLIVE ST		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64503-2443	Region 4	Facility Number	06076
TIFFANY HEIGHTS				
1531 NEBRASKA ST		<b>Telephone</b> (660) 258-7482	Alzheimer's Unit	No
MOUND CITY	MO 64470-1610	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 308		County HOLT	DMH Licensed	No
MOUND CITY	MO 64470-0308	Region 4 Medicare/Medicaid	Facility Number	07998
Moorib en i	Me 31170 0300	region : Wedicare/Medicard	racinty (vamber	01776
THE ANY ORDING REVIA DIVING	ION A VIEW CARE CENTER			
TIFFANY SPRINGS REHABILITAT: 9191 N AMBASSADOR DR	ION & HEALTH CARE CENTER	Telephone (816) 741 5570	Alzheimer's Unit	No
	MO (4154 7247	Telephone (816) 741-5570 Level of Care: SNF		No 120
KANSAS CITY	MO 64154-7247		Bed Capacity	120
Mailing Address 9191 N AMBASSADO		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-7247	Region 4 Medicare/Medicaid	Facility Number	30748
TOTAL AND ODDING OF THE CO.	COMPANIANT			
TIFFANY SPRINGS SENIOR CARE	COMMUNITY	MILL (016) (01 0010	A3 3 4 4 7 4	37
9101 N AMBASSADOR DRIVE	1.0	<b>Telephone</b> (816) 621-3810	Alzheimer's Unit	Yes
KANSAS CITY	MO 64154-7295	Level of Care: ALF**	Bed Capacity	89
Mailing Address 9101 N AMBASSADO		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-7295	Region 4	Facility Number	31745
THOUSE DI A OF				
TIGER PLACE		TO 1 1 (572) 256 4620	A1 1 1	N
2910 BLUFF CREEK DR	140 (520) 2522	<b>Telephone</b> (573) 256-4620	Alzheimer's Unit	No
COLUMBIA	MO 65201-3522	Level of Care: ICF	Bed Capacity	112
Mailing Address 2910 BLUFF CREEK		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-3522	Region 6	Facility Number	24341
TOTAL PERSON A VIEW CARE CENTER				
TIMBERLAKE CARE CENTER		T-1	A 1-1	NI-
12110 HOLMES RD	MO (4145 1505	<b>Telephone</b> (816) 941-3006	Alzheimer's Unit	No
KANSAS CITY	MO 64145-1707	Level of Care: SNF	Bed Capacity	122
Mailing Address 12110 HOLMES RD	250 6445 4505	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64145-1707	Region 3 Medicare/Medicaid	Facility Number	10962
TIMDEDS THE				
TIMBERS, THE 239 KAREN DRIVE		Tolonhono (572) 415 0200	Alabaimar!- II:4	Ma
	MO (5042 2522	<b>Telephone</b> (573) 415-0390	Alzheimer's Unit	No
HOLTS SUMMIT	MO 65043-2522	Level of Care: ALF**	Bed Capacity	50
Mailing Address 239 KAREN DRIVE		County CALLAWAY	DMH Licensed	No
HOLTS SUMMIT	MO 65043-2522	Region 6	Facility Number	30384
TIPTON OAK MANOP				
TIPTON OAK MANOR 601 WEST MORGAN ST		<b>Telephone</b> (660) 433-5574	Alzheimer's Unit	Yes
TIPTON	MO 65081-8214	Level of Care: SNF	Bed Capacity	66
			DMH Licensed	oo No
Mailing Address 601 WEST MORGAN		•		
TIPTON	MO 65081-8214	Region 6 Medicare/Medicaid	Facility Number	08036

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TOWN AND COUNTRY HEALTH & 1	REHAB		
13995 CLAYTON RD		<b>Telephone</b> (636) 227-5070	Alzheimer's Unit Yes
TOWN AND COUNTRY	MO 63017-8400	Level of Care: SNF	<b>Bed Capacity</b> 282
Mailing Address 13995 CLAYTON RD		County SAINT LOUIS COUNTY	DMH Licensed No
TOWN AND COUNTRY	MO 63017-8400	Region 7 Medicare/Medicaid	Facility Number 01508
TOWNE HOUSE, THE			
221 EAST WHITLEY		<b>Telephone</b> (573) 581-2547	Alzheimer's Unit No
MEXICO	MO 65265-2815	Level of Care: RCF*	<b>Bed Capacity</b> 29
Mailing Address PO BOX 6		County AUDRAIN	DMH Licensed Yes
8	MO 65265-0006	Region 5	Facility Number 08077
			- 33-2-3
TOWNSHIP SENIOR LIVING, THE			
4150 WEST REPUBLIC ROAD		<b>Telephone</b> (417) 881-7800	Alzheimer's Unit Yes
	MO 65619-7111	Level of Care: ALF**	Bed Capacity 66
Mailing Address 4150 WEST REPUBLIC		County GREENE	DMH Licensed No
•	MO 65619-7111	•	Facility Number 31903
BATTLEFIELD	WIO 03019-7111	Region 1	Facility Number 31903
TRI-COUNTY CARE CENTER			
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit No
	MO 63382-1252	Level of Care: RCF	Bed Capacity 20
Mailing Address 601 NORTH GALLOW			
VANDALIA	MO 63382-1252	Region 5	Facility Number 08096
TRI-COUNTY CARE CENTER			
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit Yes
	MO 63382-1252	Level of Care: SNF	Bed Capacity 90
Mailing Address 601 NORTH GALLOW		County AUDRAIN	DMH Licensed No
	MO 63382-1252	Region 5 Medicare/Medicaid	Facility Number 08096
VIII DILLII	WIO 03302 1232	Region 5 Medical e/Medicald	racinty (value)
TROY HOUSE RESCARE			
350 CAP AU GRIS		<b>Telephone</b> (636) 462-4915	Alzheimer's Unit No
TROY	MO 63379-1761	Level of Care: RCF*	<b>Bed Capacity</b> 23
Mailing Address PO BOX 271		County LINCOLN	DMH Licensed No
•	MO 63379-0271	Region 5	Facility Number 08129
		-10g-01	
TROY MANOR			
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit No
TROY	MO 63379-2308	Level of Care: ALF	Bed Capacity 20
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed No
_	MO 63379-2308	Region 5	Facility Number 05397
		-	
TROY MANOR			
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	<b>Alzheimer's Unit</b> Yes
TROY	MO 63379-2308	Level of Care: SNF	<b>Bed Capacity</b> 130
Mailing Address 200 THOMPSON DR		County LINCOLN	<b>DMH Licensed</b> No
TROY	MO 63379-2308	Region 5 Medicare/Medicaid	Facility Number 05397

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TRUMAN HEALTHCARE & REHAI	BILITATION CENTER		
206 WEST FIRST ST	SILITITION CLIVILA	<b>Telephone</b> (417) 682-5718	Alzheimer's Unit Yes
LAMAR	MO 64759-1291	Level of Care: SNF	Bed Capacity 123
Mailing Address 206 WEST FIRST ST	332 37767 1271	County BARTON	DMH Licensed No
LAMAR	MO 64759-1291	Region 1 Medicare/Medicaid	Facility Number 01346
12 HW HC	110 04737 1271	Region 1 Wedicare/Medicard	racinty runner 01340
TRUMAN LAKE MANOR, INC			
600 EAST 7TH ST		<b>Telephone</b> (417) 644-2248	Alzheimer's Unit No
LOWRY CITY	MO 64763-9671	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 415		County SAINT CLAIR	DMH Licensed No
LOWRY CITY	MO 64763-0415	Region 1 Medicare/Medicaid	Facility Number 08140
TRUSTWELL LIVING OF RAYTOW	VN		
9110 EAST 63RD ST		<b>Telephone</b> (816) 353-3400	Alzheimer's Unit No
RAYTOWN	MO 64133-4893	Level of Care: ALF**	<b>Bed Capacity</b> 69
Mailing Address 9110 EAST 63RD ST		County JACKSON	<b>DMH Licensed</b> No
RAYTOWN	MO 64133-4893	Region 3	Facility Number 24227
TUDNEDC DOCK			
TURNERS ROCK		T 1 1 (417) 450 4070	Alzheimer's Unit YES
3911 EAST HIGHWAY D	MO (5900	<b>Telephone</b> (417) 459-4070	
SPRINGFIELD	MO 65809-	Level of Care: ALF**	Bed Capacity 70
Mailing Address 3911 EAST HIGHWA		County GREENE	DMH Licensed No
SPRINGFEILD	MO 65809-	Region 1	Facility Number 32441
TWIN OAKS AT HERITAGE POINT	E		
228 SAVANNAH TERRACE		<b>Telephone</b> (636) 542-5200	<b>Alzheimer's Unit</b> Yes
WENTZVILLE	MO 63385-3741	Level of Care: ALF**	<b>Bed Capacity</b> 70
Mailing Address 228 SAVANNAH TE	RRACE	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-3741	Region 5	Facility Number 26877
TWIN OAKS ESTATE, INC			
707 EMGE RD		<b>Telephone</b> (636) 542-5200	Alzheimer's Unit No
O'FALLON	MO 63366-2118	Level of Care: RCF*	Bed Capacity 149
Mailing Address 707 EMGE RD	140 03300-2110	County SAINT CHARLES	DMH Licensed No
O'FALLON	MO 63366-2118	Region 5	Facility Number 08209
OTALLON	WO 03300-2116	Region 5	racinty Number 08209
TWIN PINES ADULT CARE CENTE	CIR CIR		
1900 S JAMISON		<b>Telephone</b> (660) 665-2887	Alzheimer's Unit Yes
KIRKSVILLE	MO 63501-5302	Level of Care: SNF	Bed Capacity 120
Mailing Address 1900 S JAMISON		County ADAIR	<b>DMH Licensed</b> No
KIRKSVILLE	MO 63501-5302	Region 5 Medicare/Medicaid	Facility Number 08218
TWINS PLACE RESIDENTIAL CAR	E FACILITY		
506 S MAIN STREET	•	<b>Telephone</b> (573) 233-8009	Alzheimer's Unit No
CHARLESTON	MO 63834-1914	Level of Care: RCF	Bed Capacity 8
Mailing Address 506 S MAIN STREET		County MISSISSIPPI	DMH Licensed No
CHARLESTON	MO 63834-1914	Region 2	Facility Number 32227
			32221

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U-CITY FOREST MANOR	
1301 PARTRIDGE AVE	Telephone (314) 862-5556 Alzheimer's Unit N
SAINT LOUIS MO 63130-1944	• •
Mailing Address 1301 PARTRIDGE AVE	County SAINT LOUIS COUNTY DMH Licensed N
SAINT LOUIS MO 63130-1944	4 Region 7 Medicare/Medicaid Facility Number 1545
UNION CARE CENTER	
1080 MARIE LANE	Telephone (636) 206-8585 Alzheimer's Unit N
UNION MO 63084-1050	
Mailing Address 1080 MARIE LANE	County FRANKLIN DMH Licensed N
UNION MO 63084-1050	·
UNION MANOR ALC	
UNION MANOR, LLC 2711 NORTH UNION BLVD	Telephone (314) 383-7310 Alzheimer's Unit N
SAINT LOUIS MO 63113-1003	• • • • • • • • • • • • • • • • • • • •
Mailing Address 2711 NORTH UNION BLVD	County SAINT LOUIS CITY DMH Licensed Ye
SAINT LOUIS MO 63113-1003	•
SAINT LOUIS MO 03113-100.	Region 7 Facility Number 1100
URBANA GROUP HOME	
310 WALNUT ST	Telephone (417) 993-4638 Alzheimer's Unit N
URBANA MO 65767-9208	
Mailing Address 310 WALNUT ST	County DALLAS DMH Licensed Ye
URBANA MO 65767-9208	Region 1 Facility Number 0824
VALLEY MANOR AND REHABILITATION CENTER	
1410 HOSPITAL DR	Telephone (816) 637-1010 Alzheimer's Unit N
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1169	Telephone (816) 637-1010 Alzheimer's Unit N
	Telephone (816) 637-1010 Alzheimer's Unit N
EXCELSIOR SPRINGS MO 64024-1168	Telephone (816) 637-1010 Alzheimer's Unit N  Level of Care: SNF Bed Capacity 12  County CLAY DMH Licensed N
EXCELSIOR SPRINGS MO 64024-1168  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS MO 64024-1168	Telephone (816) 637-1010 Alzheimer's Unit N  Level of Care: SNF Bed Capacity 12  County CLAY DMH Licensed N
EXCELSIOR SPRINGS MO 64024-1168  Mailing Address 1410 HOSPITAL DR	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242
EXCELSIOR SPRINGS MO 64024-1168  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N
EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR  FULTON  MO 65251-3938	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1
EXCELSIOR SPRINGS MO 64024-1168  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936  VALLEY PARK RETIREMENT CENTER	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1163  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-3936 Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936  VALLEY PARK RETIREMENT CENTER 355 KAREN DR	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-3936  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936  VALLEY PARK RETIREMENT CENTER 355 KAREN DR HOLTS SUMMIT MO 65043-2519	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936  VALLEY PARK RETIREMENT CENTER 355 KAREN DR HOLTS SUMMIT Mailing Address 355 KAREN DR	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 September 1 September 1 September 1 September 2 September 2 September 3 Septe
EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-1168  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-3936  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-3936  VALLEY PARK RETIREMENT CENTER 355 KAREN DR HOLTS SUMMIT MO 65043-2519	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2
EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR  FULTON  Mailing Address 2631 FAIRWAY DR  FULTON  MO 65251-3936  VALLEY PARK RETIREMENT CENTER  355 KAREN DR  HOLTS SUMMIT  MO 65043-2519  Mailing Address 355 KAREN DR  HOLTS SUMMIT  MO 65043-2519  VALLEY PARK WEST	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 County CALLAWAY DMH Licensed N Region 6 Facility Number 2798  Region 6 Facility Number 2798
EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR  FULTON  Mailing Address 2631 FAIRWAY DR  FULTON  MO 65251-3936  VALLEY PARK RETIREMENT CENTER  355 KAREN DR  HOLTS SUMMIT  MO 65043-2519  VALLEY PARK WEST  678 WINDMILL RIDGE	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 County CALLAWAY DMH Licensed N Region 6 Facility Number 2798  Telephone (573) 896-0208 Alzheimer's Unit N Region 6 Facility Number 2798
EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR  FULTON  Mailing Address 2631 FAIRWAY DR  FULTON  MO 65251-3936  VALLEY PARK RETIREMENT CENTER  355 KAREN DR  HOLTS SUMMIT  MO 65043-2519  VALLEY PARK WEST  678 WINDMILL RIDGE  CALIFORNIA  MO 65018-1966	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 County CALLAWAY DMH Licensed N Region 6 Facility Number 2798  Telephone (573) 896-0208 Alzheimer's Unit N Region 6 Facility Number 2798  Telephone (573) 796-2520 Alzheimer's Unit N Level of Care: RCF Bed Capacity 3
EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR  EXCELSIOR SPRINGS  MO 64024-1168  VALLEY PARK NORTH  2631 FAIRWAY DR  FULTON  Mailing Address 2631 FAIRWAY DR  FULTON  MO 65251-3936  VALLEY PARK RETIREMENT CENTER  355 KAREN DR  HOLTS SUMMIT  MO 65043-2519  VALLEY PARK WEST  678 WINDMILL RIDGE	Telephone (816) 637-1010 Alzheimer's Unit N Level of Care: SNF Bed Capacity 12 County CLAY DMH Licensed N Region 4 Medicare/Medicaid Facility Number 0242  Telephone (573) 592-4995 Alzheimer's Unit N Level of Care: RCF Bed Capacity 1 County CALLAWAY DMH Licensed N Region 6 Facility Number 2998  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 County CALLAWAY DMH Licensed N Region 6 Facility Number 2798  Telephone (573) 896-0208 Alzheimer's Unit N Level of Care: RCF Bed Capacity 2 County CALLAWAY DMH Licensed N Region 6 Facility Number 2798  Telephone (573) 796-2520 Alzheimer's Unit N Level of Care: RCF Bed Capacity 3 Level of Care: RCF Bed Capacity 3 County MONITEAU DMH Licensed N

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VALLEY RESIDENTIAL CARE				
101 SOUTH KNOB ST		<b>Telephone</b> (573) 546-3080	Alzheimer's Unit	No
IRONTON	MO 63650-1501	Level of Care: RCF	Bed Capacity	12
Mailing Address 203 SOUTH WASHIN	IGTON ST	County IRON	DMH Licensed	Yes
FARMINGTON	MO 63640-1836	Region 2	Facility Number	01901
VALLEY VIEW HEALTH & REHAB	II ITATION			
1600 EAST ROLLINS ST	ILITATION	<b>Telephone</b> (660) 263-6887	Alzheimer's Unit	No
MOBERLY	MO 65270-2478	Level of Care: SNF	Bed Capacity	96
Mailing Address 1600 E ROLLINS ST	WO 03270-2476	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-2478	Region 5 Medicare/Medicaid	Facility Number	13167
WODERET	110 03270 2470	Region 5 Wiedicai e/Wiedicaid	racinty Number	13107
VERONICA HOUSE				
12284 DEPAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit	No
BRIDGETON	MO 63044-2508	Level of Care: ALF**	Bed Capacity	100
Mailing Address 12284 DEPAUL DR		County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON	MO 63044-2508	Region 7	Facility Number	22460
VICTORIAN PLACE OF VIENNA, R	RESIDENTIAL CARE BY AMERICARI	E		
112 PARKWAY DR		<b>Telephone</b> (573) 422-3230	Alzheimer's Unit	No
VIENNA	MO 65582-8003	Level of Care: RCF	Bed Capacity	48
Mailing Address 112 PARKWAY DR		County MARIES	DMH Licensed	No
VIENNA	MO 65582-8003	Region 6	Facility Number	23333
		region	Tuestoy Transper	25555
VICTORIAN PLACE OF CUBA, RES	IDENTIAL CARE BY AMERICARE			
901 HIGHWAY DD		<b>Telephone</b> (573) 885-0551	Alzheimer's Unit	No
CUBA	MO 65453-8089	Level of Care: RCF	Bed Capacity	48
Mailing Address 901 HWY DD		County CRAWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6	Facility Number	25463
VICTORIAN PLACE OF HERMANN	, RESIDENTIAL CARE BY AMERICA	RE		
2120 VILLAGE LANE	,	<b>Telephone</b> (573) 486-5060	Alzheimer's Unit	No
HERMANN	MO 65041-1600	Level of Care: RCF	Bed Capacity	48
Mailing Address 2120 VILLAGE LANE		County GASCONADE	DMH Licensed	No
HERMANN	MO 65041-1600	Region 6	Facility Number	24982
		8	•	
	LLE, RESIDENTIAL CARE BY AMER			
301 NORTH 7TH ST		<b>Telephone</b> (573) 437-5396	Alzheimer's Unit	No
OWENSVILLE	MO 65066-1075	Level of Care: RCF	Bed Capacity	48
Mailing Address 301 NORTH 7TH ST		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-1075	Region 6	Facility Number	24133
VICTORIAN PLACE OF ST CLAIR,	ASSISTED LIVING BY AMERICARE			
160 CHARLES DR		<b>Telephone</b> (636) 322-0003	Alzheimer's Unit	No
SAINT CLAIR	MO 63077-1936	Level of Care: ALF**	<b>Bed Capacity</b>	48
Mailing Address 160 CHARLES DR		County FRANKLIN	DMH Licensed	No

**Facility Number** 

26005

MO 63077-1936

SAINT CLAIR

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		_	
VICTORIAN PLACE OF SULLIVAN 1250 EAST SPRINGFIELD RD	I, ASSISTED LIVING BY AMERICAR		Alzheimer's Unit No
	MO (2000 1250	Telephone (573) 468-5217	
SULLIVAN	MO 63080-1358	Level of Care: ALF**	Bed Capacity 48
Mailing Address 1250 EAST SPRINGE		County FRANKLIN	DMH Licensed No
SULLIVAN	MO 63080-1358	Region 6	Facility Number 26324
VICTORIAN PLACE OF UNION, AS	SSISTED LIVING BY AMERICARE		
1320 W MAIN		<b>Telephone</b> (636) 584-0085	Alzheimer's Unit No
UNION	MO 63084-1084	Level of Care: ALF**	Bed Capacity 48
Mailing Address 1320 W MAIN		County FRANKLIN	DMH Licensed No
UNION	MO 63084-1084	Region 6	Facility Number 24408
VICTORIAN PLACE OF WASHING	TON, RESIDENTIAL CARE BY AMER	RICARE	
2800 RABBIT TRAIL DR		<b>Telephone</b> (636) 390-9500	Alzheimer's Unit No
WASHINGTON	MO 63090-6737	Level of Care: ALF**	<b>Bed Capacity</b> 48
Mailing Address 2800 RABBIT TRAIL	L DR	County FRANKLIN	<b>DMH Licensed</b> No
WASHINGTON	MO 63090-6737	Region 6	Facility Number 27659
VILLA AT BLUE RIDGE, THE			
701 BLUE RIDGE ROAD		<b>Telephone</b> (573) 474-6111	Alzheimer's Unit No
COLUMBIA	MO 65201-3734	Level of Care: SNF	Bed Capacity 97
Mailing Address 701 BLUE RIDGE RO		County BOONE	DMH Licensed No
COLUMBIA	MO 65201-3734	Region 6 Medicare/Medicaid	Facility Number 01706
		interior (interior)	01,00
VILLA VENTURA ASSISTED LIVIN	NG FACILITY		
12100 WORNALL RD		<b>Telephone</b> (816) 203-0345	Alzheimer's Unit No
KANSAS CITY	MO 64145-1764	Level of Care: ALF**	<b>Bed Capacity</b> 50
Mailing Address 12100 WORNALL RI	D	County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64145-1764	Region 3	Facility Number 15614
VILLAGE ASSISTED LIVING			
1704 NORTHWEST O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	<b>Bed Capacity</b> 172
Mailing Address 1704 NORTHWEST	O'BRIEN RD	County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number 16108
VILLAGE ASSISTED LIVING			
1701 NW O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1701 NW O'BRIEN R	RD.	County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number 29258
VILLAGE AT CARROLL PARK, TH	TE.		
5301 HARRY TRUMAN DR	<del></del>	<b>Telephone</b> (816) 761-6838	Alzheimer's Unit No
GRANDVIEW	MO 64030-1708	Level of Care: ICF	Bed Capacity 93
Mailing Address 5301 HARRY TRUM		County JACKSON	DMH Licensed Yes
GRANDVIEW	MO 64030-1708	Region 3	Facility Number 03157
		9 -	•

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VILLAGE CARE CENTER, INC				
810 EAST EDWARDS ST		<b>Telephone</b> (660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care: RCF*	<b>Bed Capacity</b>	18
Mailing Address 810 EAST EDWARDS	SST	County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917	Region 4	<b>Facility Number</b>	20361
VILLAGE CARE CENTER, INC				
810 EAST EDWARDS ST		<b>Telephone</b> (660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care: SNF	Bed Capacity	46
Mailing Address 810 EAST EDWARDS		County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917		Facility Number	20361
WARTVILLE	WO 04400-2917	Region 4 Medicare/Medicaid	racinty Number	20301
WHA A CE CENTEED CARE OF WENT				
VILLAGE CENTER CARE OF WEN	TZVILLE	T. I. I. (626) 227 1007	A1 1	N
909 E PITMAN AVE	NO 62205 1010	<b>Telephone</b> (636) 327-1907	Alzheimer's Unit	No
WENTZVILLE	MO 63385-1818	Level of Care: ALF**	Bed Capacity	22
Mailing Address 909 E PITMAN AVE	1.0 .000.7 1010	County SAINT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-1818	Region 5	Facility Number	28026
VILLAGE WEST, THE				
318 EAST LITTLE BRICK ROAD		<b>Telephone</b> (816) 632-7611	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care: RCF*	Bed Capacity	27
Mailing Address 318 EAST LITTLE BE		County DEKALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4	Facility Number	18104
VILLAGE, THE				
320 EAST LITTLE BRICK RD		<b>Telephone</b> (816) 632-7611	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care: RCF*	Bed Capacity	49
Mailing Address 320 EAST LITTLE BE		County DEKALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4	Facility Number	08945
VILLAGES OF JACKSON CREEK M		T. 1 (016) 470 5600		3.7
19400 EAST 40TH ST COURT SOUTH		<b>Telephone</b> (816) 478-5689	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64057-1548	Level of Care: ICF	Bed Capacity	70
Mailing Address 19400 EAST 40TH ST		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1548	Region 3	Facility Number	25894
VILLACES OF LACKSON OBEEK 7	PITE			
VILLAGES OF JACKSON CREEK, T	THE	TO 1 1 (016) 705 1422	A1 1	NI-
3980 SOUTH JACKSON DR	MO (4057 2205	<b>Telephone</b> (816) 795-1433	Alzheimer's Unit	No 120
INDEPENDENCE	MO 64057-2205	Level of Care: SNF	Bed Capacity	120
Mailing Address 3980 S JACKSON DR		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-2205	Region 3 Medicare/Medicaid	Facility Number	25709
VII I ACEC OF IACUSON OBSER 7	<b>PUF</b>			
VILLAGES OF JACKSON CREEK, T	HE	Tolophono (916) 705 1422	Alzhoimon's Unit	Ma
3980 SOUTH JACKSON DR INDEPENDENCE	MO 64057-2205	Telephone (816) 795-1433 Level of Care: ALF**	Alzheimer's Unit	No
			Bed Capacity DMH Licensed	62 No.
Mailing Address 3980 S JACKSON DR		County JACKSON	Divini Licenseu	No

**Facility Number** 

25709

MO 64057-2205

INDEPENDENCE

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VILLAGES OF ST PETERS MEMOR	RY CARE			
5300 EXECUTIVE CENTER PARKWA	Y	<b>Telephone</b> (636) 477-6955	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-3182	Level of Care: ALF**	Bed Capacity	60
Mailing Address 5300 EXECUTIVE CI	ENTER PARKWAY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-3182	Region 5	Facility Number	29889
VILLAGES OF ST PETERS, THE				
5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-2594	Level of Care: SNF	Bed Capacity	130
Mailing Address 5400 EXECUTIVE CI		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5 Medicare/Medicaid	Facility Number	26014
		region 5 Medicare/Medicard	Tuelliey Tullioes	20014
VILLAGES OF ST PETERS, THE				
5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	No
SAINT PETERS	MO 63376-2594	Level of Care: ALF**	Bed Capacity	62
Mailing Address 5400 EXECUTIVE CI	ENTRE PKWY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5	Facility Number	26014
VILLAS OF JACKSON LLC THE				
670 BROADRIDGE DRIVE		<b>Telephone</b> (573) 986-8210	Alzheimer's Unit	Yes
JACKSON	MO 63755-3044	Level of Care: ALF**	Bed Capacity	84
Mailing Address 670 BROADRIDGE D	DRIVE	County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-3044	Region 2	Facility Number	30623
			•	
VINTAGE GARDENS ASSISTED LIV	VING			
3302 NORTH WOODBINE ROAD		<b>Telephone</b> (816) 279-3330	Alzheimer's Unit	No
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF**	Bed Capacity	44
Mailing Address 3302 N WOODBINE		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64505-9323	Region 4	Facility Number	22959
VINTAGE GARDENS ASSISTED LIV	VING			
3302 NORTH WOODBINE ROAD		<b>Telephone</b> (816) 279-3330	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF	<b>Bed Capacity</b>	51
Mailing Address 3302 NORTH WOOD	BINE RD	County BUCHANAN	DMH Licensed	No
SAINT JOSPEH	MO 64505-9323	Region 4	Facility Number	22959
VSL SPRINGFIELD ASSISTED LIVI	INC. LLC			
1401 WEST ELFINDALE STREET	ing, LLC	<b>Telephone</b> (417) 831-3828	Alzheimer's Unit	NO
SPRINGFIELD	MO 65807-	Telephone (417) 831-3828 Level of Care: ALF		50
Mailing Address 1401 WEST ELFINDA			Bed Capacity DMH Licensed	No
SPRINGFIELD		·		
SI KINGPIELD	MO 65807-	Region 1	Facility Number	32492
WAGNER RESIDENTIAL CARE, IN	С			
320 N CHAMBER DR		<b>Telephone</b> (573) 783-4511	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-7947	Level of Care: RCF	Bed Capacity	40
Mailing Address 320 N CHAMBER DE	₹	County MADISON	DMH Licensed	Yes
FREDERICKTOWN	MO 63645-7947	Region 2	Facility Number	28451

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WALNUT STREET ASSISTED LIVIN	NG		
404 WALNUT ST		<b>Telephone</b> (573) 996-4283	Alzheimer's Unit No
DONIPHAN	MO 63935-1420	Level of Care: ALF	<b>Bed Capacity</b> 35
Mailing Address 404 WALNUT ST		County RIPLEY	<b>DMH Licensed</b> Yes
DONIPHAN	MO 63935-1420	Region 2	Facility Number 08354
WARRENSBURG MANOR CARE CE	ENTER		
400 CARE CENTER DR		<b>Telephone</b> (660) 747-2216	Alzheimer's Unit No
WARRENSBURG	MO 64093-3100	Level of Care: SNF	Bed Capacity 88
Mailing Address 400 CARE CENTER I	OR .	County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-3100	Region 3 Medicare/Medicaid	Facility Number 08383
W. I. (182 6) (6)	1120 0.1050 0100	Region 5 Withtent Continued	Tuellity Ivallises 00505
WARRENTON MANOR		m 1 1 (22.5) 45.5.050.5	
65 STATE HIGHWAY AA	140 (2202 2201	<b>Telephone</b> (636) 456-8700	Alzheimer's Unit No
WRIGHT CITY	MO 63383-3301	Level of Care: SNF	Bed Capacity 120
Mailing Address 65 STATE HIGHWAY		County WARREN	DMH Licensed No
WRIGHT CITY	MO 63390-3301	Region 6 Medicare/Medicaid	Facility Number 02505
WARSAW HEALTH AND REHABIL	ITATION CENTER		
1609 SUNCHASE DR		<b>Telephone</b> (660) 438-2970	Alzheimer's Unit Yes
WARSAW	MO 65355-3059	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1609 SUNCHASE DR		County BENTON	DMH Licensed No
WARSAW	MO 65355-3059	Region 6 Medicare/Medicaid	<b>Facility Number</b> 15243
WATERFORD LADIES HOME			
500 NW VESPER ST		<b>Telephone</b> (816) 228-6337	Alzheimer's Unit No
BLUE SPRINGS	MO 64014-2744	Level of Care: RCF	Bed Capacity 27
Mailing Address 500 NW VESPER ST		County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64014-2744	Region 3	Facility Number 13774
BEEF STREAM	110 01011 2711	Region 5	13//4
WATTS STREET MANOR		<b>T. I.</b> (572) 421 4974	A11.
301 WATTS ST	MO (201 1020	<b>Telephone</b> (573) 431-4874	Alzheimer's Unit No
PARK HILLS	MO 63601-1839	Level of Care: RCF*	Bed Capacity 16
Mailing Address PO BOX 481	1.0 .0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	County SAINT FRANCOIS	DMH Licensed Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number 06579
WEBB CITY HEALTH AND REHAB	ILITATION CENTER		
2077 STADIUM DR		<b>Telephone</b> (417) 673-1933	Alzheimer's Unit Yes
WEBB CITY	MO 64870-9743	Level of Care: SNF	Bed Capacity 120
Mailing Address 2077 STADIUM DR		County JASPER	DMH Licensed No
WEBB CITY	MO 64870-9743	Region 1 Medicare/Medicaid	Facility Number 12286
WEBCO MANOR			
1687 W WASHINGTON ST		<b>Telephone</b> (417) 859-5144	Alzheimer's Unit No
MARSHFIELD	MO 65706-2325	Level of Care: SNF	Bed Capacity 120
Mailing Address 1687 W WASHINGTO	ON ST	County WEBSTER	DMH Licensed No
MARSHFIELD	MO 65706-2325	Region 1 Medicare/Medicaid	Facility Number 08405
			•

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WEBWOOD ASSISTED LIVING, LI	LC		
1640 WALDO HATLER DRIVE		<b>Telephone</b> (417) 451-2997	Alzheimer's Unit NO
NEOSHO	MO 64850-8059	Level of Care: ALF	Bed Capacity 31
Mailing Address 1640 WALDO HATI	LER DRIVE	County NEWTON	<b>DMH Licensed</b> No
NEOSHO	MO 64850-8059	Region 1	Facility Number 31265
WEDGEWOOD GARDENS			
17996 BUSINESS 13		<b>Telephone</b> (417) 272-6666	Alzheimer's Unit Yes
REEDS SPRING	MO 65737-9663	Level of Care: ALF**	Bed Capacity 46
Mailing Address 17996 BUSINESS 13	3	County STONE	DMH Licensed No
REEDS SPRING	MO 65737-9663	Region 1	Facility Number 20615
		region 1	20013
WELLER PLACE RETIREMENT C	ENTER		
510 WELLER STREET		<b>Telephone</b> (660) 395-2273	Alzheimer's Unit No
MACON	MO 63552-1996	Level of Care: RCF	<b>Bed Capacity</b> 18
Mailing Address 510 WELLER STRE		County MACON	<b>DMH Licensed</b> No
MACON	MO 63552-1996	Region 5	Facility Number 30888
WEST COUNTY CARE CENTER			
312 SOLLEY DR		<b>Telephone</b> (636) 391-0666	Alzheimer's Unit NO
BALLWIN	MO 63021-5248	Level of Care: SNF	Bed Capacity 137
Mailing Address 312 SOLLEY DR		County SAINT LOUIS COUNTY	DMH Licensed No
BALLWIN	MO 63021-5248	Region 7 Medicare/Medicaid	Facility Number 04970
		g	
WEST PINE GROUP HOME			
4232 WEST PINE BLVD		<b>Telephone</b> (314) 531-9450	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2840	Level of Care: RCF	<b>Bed Capacity</b> 9
Mailing Address 4232 WEST PINE BI		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63108-2840	Region 7	Facility Number 05948
WEST VUE NURSING AND REHAR	BILITATION CENTER		
210 DAVIS DR		<b>Telephone</b> (417) 256-2152	Alzheimer's Unit Yes
WEST PLAINS	MO 65775-2241	Level of Care: SNF	<b>Bed Capacity</b> 130
Mailing Address 210 DAVIS DR		County HOWELL	DMH Licensed No
WEST PLAINS	MO 65775-2241	Region 1 Medicare/Medicaid	Facility Number 21733
		8	•
	~		
WESTBROOK CARE CENTER, INC			
401 S PLATTE CLAY WAY		<b>Telephone</b> (816) 628-2222	Alzheimer's Unit No
KEARNEY	MO 64060-7714	Level of Care: RCF*	Bed Capacity 27
Mailing Address 401 S PLATTE CLA		County CLAY	<b>DMH Licensed</b> No
KEARNEY	MO 64060-7714	Region 4	Facility Number 19757
WESTBROOK TERRACE - ASSIST	ED LIVING BY AMERICARE		
3335 NORTH TEN MILE DR		<b>Telephone</b> (573) 635-2600	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-0528	Level of Care: ALF**	<b>Bed Capacity</b> 36
Mailing Address 3335 NORTH TEN M		County COLE	DMH Licensed No
JEFFERSON CITY	MO 65109-0528	Region 6	Facility Number 20440
		· <del>o</del> ·	

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WESTBURY SENIOR LIVING THE			
550 STONE VALLEY PARKWAY		<b>Telephone</b> (573) 818-7030	Alzheimer's Unit Yes
COLUMBIA	MO 65203-5567	Level of Care: ALF**	Bed Capacity 66
Mailing Address 550 STONE VALLEY		County BOONE	DMH Licensed No
COLUMBIA	MO 65203-5567	Region 6	Facility Number 32666
WEGE GAMES TO VOTE THE			
WESTCHESTER HOUSE, THE		<b>7.1.</b> (21.1) 450 1200	
550 WHITE RD	MO (2017 221)	<b>Telephone</b> (314) 469-1200	Alzheimer's Unit No
CHESTERFIELD	MO 63017-2316	Level of Care: SNF	Bed Capacity 159
Mailing Address 550 WHITE RD	MO (2017 2017	County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-2316	Region 7 Medicare/Medicaid	Facility Number 08474
WESTGATE			
3130 JOHN DUFFY DR		<b>Telephone</b> (417) 553-3688	Alzheimer's Unit Yes
JOPLIN	MO 64804-1569	Level of Care: SNF	Bed Capacity 120
Mailing Address 3130 JOHN DUFFY D		County JASPER	DMH Licensed No
JOPLIN	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 31754
JOILEN	110 04004 130)	Region 1 Medical C/Medicald	Tacinty Number 31/34
WESTPORT ESTATES - ASSISTED L	IVING BY AMERICARE		
904 APACHE DR		<b>Telephone</b> (660) 886-5500	Alzheimer's Unit Yes
MARSHALL	MO 65340-2900	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 904 APACHE DR		County SALINE	DMH Licensed No
MARSHALL	MO 65340-2900	Region 5	Facility Number 16202
			·
WESTVIEW AT ELLISVILLE ASSIST	TED LIVING		
27 REINKE RD		<b>Telephone</b> (636) 527-5554	Alzheimer's Unit Yes
ELLISVILLE	MO 63021-4734	Level of Care: ALF**	Bed Capacity 99
Mailing Address 27 REINKE RD		County SAINT LOUIS COUNTY	DMH Licensed No
ELLISVILLE	MO 63021-4734	Region 7	Facility Number 28184
NIEGOVIEW NIEDONG WOME			
WESTVIEW NURSING HOME		T. 1. 1. (572) 267, 2020	A11
301 WEST DUNLOP ST	MO (242) 22(7	<b>Telephone</b> (573) 267-3920	Alzheimer's Unit No
CENTER  Matter Address 201 WEST DUNI OD S	MO 63436-2267	Level of Care: SNF	Bed Capacity 60
Mailing Address 301 WEST DUNLOP S		County RALLS	DMH Licensed No
CENTER	MO 63436-2267	Region 5 Medicare/Medicaid	Facility Number 15634
WESTWOOD HILLS HEALTH & RE	HABILITATION CENTER		
3100 WARRIOR LN		<b>Telephone</b> (573) 785-0851	Alzheimer's Unit No
POPLAR BLUFF	MO 63901-8686	Level of Care: SNF	Bed Capacity 132
Mailing Address 3100 WARRIOR LAND	E	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-8686	Region 2 Medicare/Medicaid	Facility Number 08512
		g ·	•
WEXFORD PLACE ASSISTED LIVIN	NG AND MEMORY SUPPORT BY SEI	NIOR STAR	
6460 NORTH COSBY AVE		<b>Telephone</b> (816) 743-4259	<b>Alzheimer's Unit</b> Yes
KANSAS CITY	MO 64151-2377	Level of Care: ALF**	<b>Bed Capacity</b> 98
Mailing Address 6460 NORTH COSBY		County PLATTE	<b>DMH Licensed</b> No
KANSAS CITY	MO 64151-2377	Region 4	Facility Number 28861

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WHISPERING OAKS RCF II, LLC				
203 NORTH B ST	Telephone	(573) 686-4490	Alzheimer's Unit	No
	901-5413 Level of Care	` /	Bed Capacity	45
Mailing Address 203 NORTH B ST		UTLER	DMH Licensed	Yes
· ·	901-5413 <b>Region</b> 2	OTLER	Facility Number	16751
	Kegion 2		Tuestey Trustages	10/31
WHISPERING PINES SENIOR LIVING LLC				
4904 EAST WELLRIDGE LN	Telephone	(417) 781-0099	Alzheimer's Unit	No
JOPLIN MO 648	801-8793 Level of Care	: RCF*	Bed Capacity	20
Mailing Address 4904 EAST WELLRIDGE LN	County JA	ASPER	DMH Licensed	No
JOPLIN MO 648	801-8793 <b>Region</b> 1		Facility Number	09477
WHITE OAK ASSISTED LIVING				
1515 WEST WHITE OAK	Telephone	(816) 254-3500	Alzheimer's Unit	No
	050-2557 Level of Care	` '	Bed Capacity	78
Mailing Address 1515 WEST WHITE OAK		ACKSON	DMH Licensed	No
· ·	050-2557 <b>Region</b> 3		Facility Number	06604
			·	
WILD-KAT ESTATES, LLC				
300 WEST FAIRVIEW STREET	Telephone	(660) 728-2301	Alzheimer's Unit	No
	463-9606 Level of Care	: ALF**	Bed Capacity	24
Mailing Address 300 WEST FAIRVIEW STREET	T County G	ENTRY	DMH Licensed	No
KING CITY MO 644	463-9606 <b>Region</b> 4		Facility Number	04305
WILDWOOD SENIOR LIVING THE				
3002 SOUTH JOHN DUFFY DRIVE	Telephone	(417) 623-2233	Alzheimer's Unit	Yes
JOPLIN MO 648	804-1656 Level of Care	: ALF**	Bed Capacity	74
Mailing Address 3002 SOUTH JOHN DUFFY DE	RIVE County JA	ASPER	DMH Licensed	No
JOPLIN MO 648	804-1656 <b>Region</b> 1		Facility Number	31370
WILLARD GARE GENTER		TEMPODA DV. CLOS	NIDE COAFEING	
WILLARD CARE CENTER	Talankana	TEMPORARY CLOS		<b>V</b>
400 WEST WALNUT LN	Telephone 781-9432 Level of Care	(417) 742-3593	Alzheimer's Unit	Yes
WILLARD MO 65' Mailing Address 400 W WALNUT LN			Bed Capacity DMH Licensed	66 No
· ·	County G 781-9432 Region 1	REENE Madiagra/Madiagid	DMH Licensed Facility Number	No 16393
WILLARD MO 03	region 1	Medicare/Medicaid	Facility Number	10393
WILLOW BROOKE - ASSISTED LIVING BY	AMERICARE			
#1 NORTH POTOMAC CT	Telephone	(636) 583-2799	Alzheimer's Unit	No
UNION MO 630	084-1113 Level of Care	: ALF**	Bed Capacity	50
Mailing Address 1 NORTH POTOMAC CT	County F	RANKLIN	DMH Licensed	No
UNION MO 630	084-1113 <b>Region</b> 6		Facility Number	13596
WILLOW CARE NURSING HOME				
2646 STATE ROUTE 76	Telephone	(417) 469-3152	Alzheimer's Unit	Yes
WILLOW SPRINGS MO 65	793-8254 Level of Care	: SNF	<b>Bed Capacity</b>	105
Mailing Address PO BOX 309	County H	OWELL	DMH Licensed	No
WILLOW SPRINGS MO 65	793-0309 <b>Region</b> 1	Medicare/Medicaid	Facility Number	08614

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WILLOW WEST APARTMENTS				
2644 STATE ROUTE 76		<b>Telephone</b> (417) 469-3152	Alzheimer's Unit	No
WILLOW SPRINGS	MO 65793-8254	Level of Care: ALF	<b>Bed Capacity</b>	36
Mailing Address PO BOX 309		County HOWELL	DMH Licensed	No
WILLOW SPRINGS	MO 65793-0309	Region 1	Facility Number	08614
WILSHIRE AT LAKEWOOD REHA	AB CENTER			
600 NE MEADOWVIEW DR		<b>Telephone</b> (816) 554-9866	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64064-1983	Level of Care: SNF	Bed Capacity	170
Mailing Address 600 NE MEADOWV		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64064-1983	Region 3 Medicare/Medicaid	Facility Number	22471
ELLOSOMINIT	110 01001 1703	region 5 Medical Confederatu	racincy (value)	22471
WILSON'S CREEK NURSING & RE	EHAR			
3403 WEST MT VERNON		<b>Telephone</b> (417) 864-5600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity	172
Mailing Address 3403 WEST MT VEI		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number	05579
STALL (STABLE)	110 000020211	region 1 Medicard/Medicard	Tuesday Tvandor	03317
WINCHESTER NURSING CENTER	R, INC			
400 WINCHESTER DRIVE		<b>Telephone</b> (573) 293-6702	Alzheimer's Unit	No
BERNIE	MO 63822-7500	Level of Care: SNF	Bed Capacity	44
Mailing Address PO BOX 760		County STODDARD	DMH Licensed	No
BERNIE	MO 63822-0760	Region 2 Medicare/Medicaid	Facility Number	31391
			•	
WINCHESTER PLACE ASSISTED	LIVING, LLC			
404 WINCHESTER ROAD		<b>Telephone</b> (573) 293-6705	Alzheimer's Unit	No
BERNIE	MO 63822-7500	Level of Care: ALF**	Bed Capacity	38
Mailing Address PO BOX 760		County STODDARD	DMH Licensed	No
BERNIE	MO 63822-0760	Region 2	Facility Number	24912
WINDEMERE HEALTHCARE CEN	NTER LLC			
3100 NORTH WEST VIVION RD		<b>Telephone</b> (816) 741-0753	Alzheimer's Unit	NO
RIVERSIDE	MO 64150-9436	Level of Care: RCF	Bed Capacity	65
Mailing Address 3100 NORTH WEST	Γ VIVION RD	County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-9436	Region 4	Facility Number	08668
WINDOOD FOTATEC OF CT OHAD	LECCMAL LLC			
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC	Th. 1 - 1 - (626) 046 4066	A1 1	NI-
2150 WEST RANDOLPH ST	MO 62201 0804	Telephone (636) 946-4966	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-0894	Level of Care: SNF	Bed Capacity	66
Mailing Address 2150 WEST RANDO		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-0894	Region 5 Medicare/Medicaid	Facility Number	06316
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC			
2150 WEST RANDOLPH ST	,	<b>Telephone</b> (636) 946-4966	Alzheimer's Unit	Yes
SAINT CHARLES	MO 63301-0894	Level of Care: ALF**	Bed Capacity	90
Mailing Address 2150 WEST RANDO	OLPH ST	County SAINT CHARLES	DMH Licensed	No

**Facility Number** 

06316

MO 63301-0894

SAINT CHARLES

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WINDSOR HEALTHCARE & REHA	AB CENTER			
809 WEST BENTON		<b>Telephone</b> (660) 647-3102	Alzheimer's Unit	No
WINDSOR	MO 65360-1239	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 5		County HENRY	DMH Licensed	No
WINDSOR	MO 65360-0005	Region 1 Medicare/Medicaid	Facility Number	21715
WINFIELD RESIDENTIAL CARE				
220 WEST WALNUT ST		<b>Telephone</b> (636) 668-8110	Alzheimer's Unit	No
WINFIELD	MO 63389-1122	Level of Care: RCF	Bed Capacity	20
Mailing Address 220 WEST WALNUT	ΓST	County LINCOLN	DMH Licensed	Yes
WINFIELD	MO 63389-1122	Region 5	Facility Number	08729
		3	•	
WOOD OAKS, INC		T. I		
1804 SOUTH STERLING AVE	3.50 510.50 50.15	<b>Telephone</b> (816) 254-5400	Alzheimer's Unit	No
INDEPENDENCE	MO 64052-3845	Level of Care: RCF*	Bed Capacity	30
Mailing Address PO BOX 520049	3.50 510.50 00.10	County JACKSON	DMH Licensed	Yes
INDEPENDENCE	MO 64052-0049	Region 3	Facility Number	02389
WOODLAND MANOR				
1347 EAST VALLEY WATERMILL R	D	<b>Telephone</b> (417) 833-1220	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3739	Level of Care: SNF	<b>Bed Capacity</b>	180
Mailing Address 1347 EAST VALLEY	WATERMILL RD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3739	Region 1 Medicare/Medicaid	<b>Facility Number</b>	05794
WOODLAND MANOR NURSING C	FNTER			
100 WOODLAND COURT	ENTER	<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	No
ARNOLD	MO 63010-2030	Level of Care: SNF	Bed Capacity	178
Mailing Address 100 WOODLAND C		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2030	Region 2 Medicare/Medicaid	Facility Number	12549
ARTOLD	110 03010 2030	Region 2 Medical e/Medicald	racinty (valide)	12349
WORTH COUNTY CONVALESCEN	NT CENTER			
503 E 4TH ST		<b>Telephone</b> (660) 564-3304	Alzheimer's Unit	No
GRANT CITY	MO 64456-8363	Level of Care: SNF	Bed Capacity	50
Mailing Address 503 E 4TH ST		County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-8363	Region 4 Medicare/Medicaid	Facility Number	08779

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).